Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main _{3/18/15 9:55AM}
Document Page 1 of 50

| BI (Official | Form 1)(04 | /13) | | | | oamon | | .go <u> </u> | | | | | |
|---|---|------------------------------|--|-------------------------------------|--|--|---|--|---|--------------------------------|---|--------------|------------------|
| United States Bankruptcy (Northern District of Illinoi | | | | | | | | | | Vol | luntary | Petition | |
| | Debtor (if inde | | er Last, First | , Middle): | | | Name | of Joint De | ebtor (Spouse) |) (Last, First | , Middle): | | |
| All Other Names used by the Debtor in the last 8 years (include married, maiden, and trade names): | | | | | | | used by the J maiden, and | | | 8 years | | | |
| Last four di (if more than or | igits of Soc. | Sec. or Indi | vidual-Taxp | ayer I.D. (| (ITIN)/Com | plete EIN | Last f | our digits o | f Soc. Sec. or | Individual- | Гахрауег I. | D. (ITIN) N | No./Complete EIN |
| Street Addr 20666 N | ress of Debto N. Margaro Ishire, IL | * | Street, City, | and State) |): | ZID C. 1 | | Address of | Joint Debtor | (No. and Str | reet, City, a | and State): | TID C. I |
| | | | | | | ZIP Code 60069 | | | | | | | ZIP Code |
| County of F | Residence or | of the Princ | cipal Place o | f Busines | s: | | Coun | y of Reside | ence or of the | Principal Pla | ace of Busi | ness: | |
| Mailing Ad | ldress of Deb | otor (if diffe | rent from str | eet addres | ss): | | Mailii | ng Address | of Joint Debte | or (if differe | nt from str | eet address) | : |
| | | | | | _ | ZIP Code | 2 | | | | | | ZIP Code |
| Location of (if different | f Principal Ast from street | ssets of Bus address abo | siness Debtor ve): | • | | | | | | | | | |
| (Form | • • | Debtor | one hov) | | | of Busines | S | | • | of Bankrup Petition is Fi | | | ich |
| (Form of Organization) (Check one box) Individual (includes Joint Debtors) See Exhibit D on page 2 of this form. □ Corporation (includes LLC and LLP) □ Partnership □ Other (If debtor is not one of the above entities, check this box and state type of entity below.) (Check one box) □ Health Care Business □ Single Asset Real Estate as de in 11 U.S.C. § 101 (51B) □ Railroad □ Stockbroker □ Commodity Broker □ Clearing Bank | | | s defined | Chapt Chapt Chapt Chapt Chapt Chapt | er 7 er 9 er 11 er 12 | ☐ Cl of ☐ Cl | hapter 15 F a Foreign hapter 15 F | Petition for I Main Proce | Recognition | | | | |
| Chapter 15 Debtors Country of debtor's center of main interests: Each country in which a foreign proceeding by, regarding, or against debtor is pending: Check box, if a Debtor is a tax-exemp under Title 26 of the Code (the Internal Re | | | t, if applicable appli | le) zation states | defined | are primarily co I in 11 U.S.C. § ed by an indivi- onal, family, or l | (Checlonsumer debts, 101(8) as dual primarily | for | | s are primarily ness debts. | | | |
| ☐ Filing Fee to be paid in installments (applicable to individuals only). Must attach signed application for the court's consideration certifying that the debtor is unable to pay fee except in installments. Rule 1006(b). See Official Form 3A. ☐ Filing Fee waiver requested (applicable to chapter 7 individuals only). Must attach signed application for the court's consideration. See Official Form 3B. | | | | | Debtor is a si Debtor is not if: Debtor's agg are less than all applicabl A plan is bei Acceptances | regate nonco \$2,490,925 (e boxes: ng filed with of the plan w | debtor as defin ness debtor as d ntingent liquida amount subject | defined in 11 United debts (exc to adjustment | C. § 101(511 J.S.C. § 101 Cluding debts | (51D). s owed to insi | iders or affiliates) ree years thereafter). reditors, | | |
| ☐ Debtor of Debtor of | Administrates that estimates that estimates that ill be no fund | t funds will t, after any | be available | erty is ex | cluded and | administra | | es paid, | | THIS | S SPACE IS | FOR COURT | USE ONLY |
| Estimated N | Number of C 50- 99 | reditors 100- 199 | □ 200- 999 | 1,000- 5,000 | 5,001- 10,000 | 10,001- 25,000 | 25,001- 50,000 | 50,001- 100,000 | OVER 100,000 | | | | |
| Estimated A \$0 to \$50,000 | Assets \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,000 to \$500 million | \$500,000,001 to \$1 billion | More than \$1 billion | | | | |
| Estimated L \$0 to \$50,000 | Liabilities \$50,001 to \$100,000 | \$100,001 to \$500,000 | \$500,001 to \$1 million | \$1,000,001 to \$10 million | \$10,000,001 to \$50 million | \$50,000,001 to \$100 million | \$100,000,001 to \$500 million | \$500,000,001 to \$1 billion | | | | | |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:55AM

Document Page 2 of 50 **B1** (Official Form 1)(04/13) Page 2 Name of Debtor(s): Voluntary Petition Gonzalez, Carmen (This page must be completed and filed in every case) All Prior Bankruptcy Cases Filed Within Last 8 Years (If more than two, attach additional sheet) Case Number: Date Filed: Location Where Filed: - None -Date Filed: Location Case Number: Where Filed: Pending Bankruptcy Case Filed by any Spouse, Partner, or Affiliate of this Debtor (If more than one, attach additional sheet) Name of Debtor: Case Number: Date Filed: - None -District: Relationship: Judge: Exhibit B Exhibit A (To be completed if debtor is an individual whose debts are primarily consumer debts.) (To be completed if debtor is required to file periodic reports (e.g., I, the attorney for the petitioner named in the foregoing petition, declare that I forms 10K and 10Q) with the Securities and Exchange Commission have informed the petitioner that [he or she] may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, and have explained the relief available pursuant to Section 13 or 15(d) of the Securities Exchange Act of 1934 under each such chapter. I further certify that I delivered to the debtor the notice and is requesting relief under chapter 11.) required by 11 U.S.C. §342(b). ☐ Exhibit A is attached and made a part of this petition. X /s/ David M. Siegel March 18, 2015 Signature of Attorney for Debtor(s) (Date) David M. Siegel Exhibit C Does the debtor own or have possession of any property that poses or is alleged to pose a threat of imminent and identifiable harm to public health or safety? Yes, and Exhibit C is attached and made a part of this petition. No. Exhibit D (To be completed by every individual debtor. If a joint petition is filed, each spouse must complete and attach a separate Exhibit D.) Exhibit D completed and signed by the debtor is attached and made a part of this petition. If this is a joint petition: ☐ Exhibit D also completed and signed by the joint debtor is attached and made a part of this petition. Information Regarding the Debtor - Venue (Check any applicable box) Debtor has been domiciled or has had a residence, principal place of business, or principal assets in this District for 180 days immediately preceding the date of this petition or for a longer part of such 180 days than in any other District. There is a bankruptcy case concerning debtor's affiliate, general partner, or partnership pending in this District. Debtor is a debtor in a foreign proceeding and has its principal place of business or principal assets in the United States in this District, or has no principal place of business or assets in the United States but is a defendant in an action or proceeding [in a federal or state court] in this District, or the interests of the parties will be served in regard to the relief sought in this District. Certification by a Debtor Who Resides as a Tenant of Residential Property (Check all applicable boxes) Landlord has a judgment against the debtor for possession of debtor's residence. (If box checked, complete the following.) (Name of landlord that obtained judgment) (Address of landlord) Debtor claims that under applicable nonbankruptcy law, there are circumstances under which the debtor would be permitted to cure the entire monetary default that gave rise to the judgment for possession, after the judgment for possession was entered, and Debtor has included with this petition the deposit with the court of any rent that would become due during the 30-day period after the filing of the petition. Debtor certifies that he/she has served the Landlord with this certification. (11 U.S.C. § 362(l)).

Voluntary Petition

(This page must be completed and filed in every case)

Signatures

Signature(s) of Debtor(s) (Individual/Joint)

I declare under penalty of perjury that the information provided in this petition is true and correct.

If petitioner is an individual whose debts are primarily consumer debts and has chosen to file under chapter 7] I am aware that I may proceed under chapter 7, 11, 12, or 13 of title 11, United States Code, understand the relief available under each such chapter, and choose to proceed under chapter 7. [If no attorney represents me and no bankruptcy petition preparer signs the petition] I have obtained and read the notice required by 11 U.S.C. §342(b).

I request relief in accordance with the chapter of title 11, United States Code, specified in this petition.

X /s/ Carmen Gonzalez

Signature of Debtor Carmen Gonzalez

Signature of Joint Debtor

Telephone Number (If not represented by attorney)

March 18, 2015

Date

Signature of Attorney*

X /s/ David M. Siegel

Signature of Attorney for Debtor(s)

David M. Siegel #06207611

Printed Name of Attorney for Debtor(s)

David M. Siegel & Associates

Firm Name

790 Chaddick Drive Wheeling, IL 60090

Address

(847) 520-8100

Telephone Number

March 18, 2015

Date

*In a case in which § 707(b)(4)(D) applies, this signature also constitutes a certification that the attorney has no knowledge after an inquiry that the information in the schedules is incorrect.

Signature of Debtor (Corporation/Partnership)

I declare under penalty of perjury that the information provided in this petition is true and correct, and that I have been authorized to file this petition on behalf of the debtor.

The debtor requests relief in accordance with the chapter of title 11, United States Code, specified in this petition.

Signature of Authorized Individual

Printed Name of Authorized Individual

Title of Authorized Individual

Date

Signature of a Foreign Representative

I declare under penalty of perjury that the information provided in this petition is true and correct, that I am the foreign representative of a debtor in a foreign proceeding, and that I am authorized to file this petition.

(Check only one box.)

Name of Debtor(s):

Gonzalez, Carmen

- ☐ I request relief in accordance with chapter 15 of title 11. United States Code. Certified copies of the documents required by 11 U.S.C. §1515 are attached.
- ☐ Pursuant to 11 U.S.C. §1511, I request relief in accordance with the chapter of title 11 specified in this petition. A certified copy of the order granting recognition of the foreign main proceeding is attached.

Signature of Foreign Representative

Printed Name of Foreign Representative

Date

Signature of Non-Attorney Bankruptcy Petition Preparer

I declare under penalty of perjury that: (1) I am a bankruptcy petition preparer as defined in 11 U.S.C. § 110; (2) I prepared this document for compensation and have provided the debtor with a copy of this document and the notices and information required under 11 U.S.C. §§ 110(b), 110(h), and 342(b); and, (3) if rules or guidelines have been promulgated pursuant to 11 U.S.C. § 110(h) setting a maximum fee for services chargeable by bankruptcy petition preparers, I have given the debtor notice of the maximum amount before preparing any document for filing for a debtor or accepting any fee from the debtor, as required in that section. Official Form 19 is attached.

Printed Name and title, if any, of Bankruptcy Petition Preparer

Social-Security number (If the bankrutpcy petition preparer is not an individual, state the Social Security number of the officer, principal, responsible person or partner of the bankruptcy petition preparer.)(Required by 11 U.S.C. § 110.)

Date

Address

Signature of bankruptcy petition preparer or officer, principal, responsible person, or partner whose Social Security number is provided above.

Names and Social-Security numbers of all other individuals who prepared or assisted in preparing this document unless the bankruptcy petition preparer is not an individual:

If more than one person prepared this document, attach additional sheets conforming to the appropriate official form for each person.

A bankruptcy petition preparer's failure to comply with the provisions of title 11 and the Federal Rules of Bankruptcy Procedure may result in fines or imprisonment or both. 11 U.S.C. §110; 18 U.S.C. §156.

B 1D (Official Form 1, Exhibit D) (12/09)

United States Bankruptcy Court Northern District of Illinois

| In re | Carmen Gonzalez | | Case No. | |
|-------|-----------------|-----------|----------|---|
| · | | Debtor(s) | Chapter | 7 |

EXHIBIT D - INDIVIDUAL DEBTOR'S STATEMENT OF COMPLIANCE WITH CREDIT COUNSELING REQUIREMENT

Warning: You must be able to check truthfully one of the five statements regarding credit counseling listed below. If you cannot do so, you are not eligible to file a bankruptcy case, and the court can dismiss any case you do file. If that happens, you will lose whatever filing fee you paid, and your creditors will be able to resume collection activities against you. If your case is dismissed and you file another bankruptcy case later, you may be required to pay a second filing fee and you may have to take extra steps to stop creditors' collection activities.

Every individual debtor must file this Exhibit D. If a joint petition is filed, each spouse must complete and file a separate Exhibit D. Check one of the five statements below and attach any documents as directed.

- 1. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, and I have a certificate from the agency describing the services provided to me. *Attach a copy of the certificate and a copy of any debt repayment plan developed through the agency*.
- □ 2. Within the 180 days **before the filing of my bankruptcy case**, I received a briefing from a credit counseling agency approved by the United States trustee or bankruptcy administrator that outlined the opportunities for available credit counseling and assisted me in performing a related budget analysis, but I do not have a certificate from the agency describing the services provided to me. *You must file a copy of a certificate from the agency describing the services provided to you and a copy of any debt repayment plan developed through the agency no later than 14 days after your bankruptcy case is filed.*
- □ 3. I certify that I requested credit counseling services from an approved agency but was unable to obtain the services during the seven days from the time I made my request, and the following exigent circumstances merit a temporary waiver of the credit counseling requirement so I can file my bankruptcy case now. [Summarize exigent circumstances here.]

If your certification is satisfactory to the court, you must still obtain the credit counseling briefing within the first 30 days after you file your bankruptcy petition and promptly file a certificate from the agency that provided the counseling, together with a copy of any debt management plan developed through the agency. Failure to fulfill these requirements may result in dismissal of your case. Any extension of the 30-day deadline can be granted only for cause and is limited to a maximum of 15 days. Your case may also be dismissed if the court is not satisfied with your reasons for filing your bankruptcy case without first receiving a credit counseling briefing.

☐ 4. I am not required to receive a credit counseling briefing because of: [Check the applicable statement.] [Must be accompanied by a motion for determination by the court.]

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main $_{3/18/15}$ 9:56AM Document Page 5 of 50

| B 1D (Official Form 1, Exhibit D) (12/09) - Cont. | Page 2 | | | | |
|---|---------------------|--|--|--|--|
| ☐ Incapacity. (Defined in 11 U.S.C. § 109(h)(4) as impaired by reason of mental illness or mental deficiency so as to be incapable of realizing and making rational decisions with respect to financial responsibilities.); ☐ Disability. (Defined in 11 U.S.C. § 109(h)(4) as physically impaired to the extent of being unable, after reasonable effort, to participate in a credit counseling briefing in person, by telephone, or through the Internet.); | | | | | |
| ☐ Active military duty in a military co | mbat zone. | | | | |
| □ 5. The United States trustee or bankruptcy administrator has determined that the credit counseling requirement of 11 U.S.C. § 109(h) does not apply in this district. | | | | | |
| I certify under penalty of perjury that the information provided above is true and correct. | | | | | |
| Signature of Debtor: | /s/ Carmen Gonzalez | | | | |
| | Carmen Gonzalez | | | | |
| Date: March 18, 2015 | | | | | |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 6 of 50

B6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

| In re | Carmen Gonzalez | | Case No. | | |
|-------|-----------------|----------|----------|---|--|
| - | | Debtor , | | | |
| | | | Chapter | 7 | |
| | | | • | | |

SUMMARY OF SCHEDULES

Indicate as to each schedule whether that schedule is attached and state the number of pages in each. Report the totals from Schedules A, B, D, E, F, I, and J in the boxes provided. Add the amounts from Schedules A and B to determine the total amount of the debtor's assets. Add the amounts of all claims from Schedules D, E, and F to determine the total amount of the debtor's liabilities. Individual debtors must also complete the "Statistical Summary of Certain Liabilities and Related Data" if they file a case under chapter 7, 11, or 13.

| NAME OF SCHEDULE | ATTACHED (YES/NO) | NO. OF SHEETS | ASSETS | LIABILITIES | OTHER |
|--|----------------------|------------------|-------------------|-------------|----------|
| A - Real Property | Yes | 1 | 219,402.00 | | |
| B - Personal Property | Yes | 3 | 38,760.00 | | |
| C - Property Claimed as Exempt | Yes | 1 | | | |
| D - Creditors Holding Secured Claims | Yes | 1 | | 233,305.00 | |
| E - Creditors Holding Unsecured Priority Claims (Total of Claims on Schedule E) | Yes | 1 | | 0.00 | |
| F - Creditors Holding Unsecured Nonpriority Claims | Yes | 6 | | 117,801.00 | |
| G - Executory Contracts and Unexpired Leases | Yes | 1 | | | |
| H - Codebtors | Yes | 1 | | | |
| I - Current Income of Individual Debtor(s) | Yes | 2 | | | 1,560.00 |
| J - Current Expenditures of Individual Debtor(s) | Yes | 2 | | | 2,481.00 |
| Total Number of Sheets of ALL Schedu | ıles | 19 | | | |
| | T | otal Assets | 258,162.00 | | |
| | | | Total Liabilities | 351,106.00 | |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 7 of 50

B 6 Summary (Official Form 6 - Summary) (12/14)

United States Bankruptcy Court Northern District of Illinois

| In re | Carmen Gonzalez | | Case No. | |
|-------|-----------------|--------|----------|---|
| _ | | Debtor | | |
| | | | Chapter | 7 |

STATISTICAL SUMMARY OF CERTAIN LIABILITIES AND RELATED DATA (28 U.S.C. § 159)

If you are an individual debtor whose debts are primarily consumer debts, as defined in § 101(8) of the Bankruptcy Code (11 U.S.C.§ 101(8)), filing a case under chapter 7, 11 or 13, you must report all information requested below.

☐ Check this box if you are an individual debtor whose debts are NOT primarily consumer debts. You are not required to report any information here.

This information is for statistical purposes only under 28 U.S.C. \S 159.

Summarize the following types of liabilities, as reported in the Schedules, and total them.

| Type of Liability | Amount |
|---|--------|
| Domestic Support Obligations (from Schedule E) | 0.00 |
| Taxes and Certain Other Debts Owed to Governmental Units (from Schedule E) | 0.00 |
| Claims for Death or Personal Injury While Debtor Was Intoxicated (from Schedule E) (whether disputed or undisputed) | 0.00 |
| Student Loan Obligations (from Schedule F) | 0.00 |
| Domestic Support, Separation Agreement, and Divorce Decree Obligations Not Reported on Schedule E | 0.00 |
| Obligations to Pension or Profit-Sharing, and Other Similar Obligations (from Schedule F) | 0.00 |
| TOTAL | 0.00 |

State the following:

| Average Income (from Schedule I, Line 12) | 1,560.00 |
|--|----------|
| Average Expenses (from Schedule J, Line 22) | 2,481.00 |
| Current Monthly Income (from Form 22A-1 Line 11; OR, Form 22B Line 14; OR, Form 22C-1 Line 14) | 2,356.00 |

State the following:

| Total from Schedule D, "UNSECURED PORTION, IF ANY" column | | 13,903.00 |
|--|------|------------|
| 2. Total from Schedule E, "AMOUNT ENTITLED TO PRIORITY" column | 0.00 | |
| 3. Total from Schedule E, "AMOUNT NOT ENTITLED TO PRIORITY, IF ANY" column | | 0.00 |
| 4. Total from Schedule F | | 117,801.00 |
| 5. Total of non-priority unsecured debt (sum of 1, 3, and 4) | | 131,704.00 |

3/18/15 9:55AM

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 8 of 50

B6A (Official Form 6A) (12/07)

| In re | Carmen Gonzalez | Case No |
|-------|-----------------|----------|
| _ | | Debtor , |

SCHEDULE A - REAL PROPERTY

Except as directed below, list all real property in which the debtor has any legal, equitable, or future interest, including all property owned as a cotenant, community property, or in which the debtor has a life estate. Include any property in which the debtor holds rights and powers exercisable for the debtor's own benefit. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor holds no interest in real property, write "None" under "Description and Location of Property."

Do not include interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If an entity claims to have a lien or hold a secured interest in any property, state the amount of the secured claim. See Schedule D. If no entity claims to hold a secured interest in the property, write "None" in the column labeled "Amount of Secured Claim." If the debtor is an individual or if a joint petition is filed, state the amount of any exemption claimed in the property only in Schedule C - Property Claimed as Exempt.

| Single Family Home 20666 N. Margaret Ave. Lincolnshire, IL 60069 | Fee simple | - | 219,402.00 | 233,305.00 |
|--|--|---|--|----------------------------|
| Description and Location of Property | Nature of Debtor's Interest in Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption | Amount of Secured Claim |

Sub-Total > **219,402.00** (Total of this page)

Total > **219,402.00**

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 9 of 50

B6B (Official Form 6B) (12/07)

| In re | Carmen Gonzalez | Case N | Vo |
|-------|-----------------|--------|----|
| | | Dobtor | |

SCHEDULE B - PERSONAL PROPERTY

Except as directed below, list all personal property of the debtor of whatever kind. If the debtor has no property in one or more of the categories, place an "x" in the appropriate position in the column labeled "None." If additional space is needed in any category, attach a separate sheet properly identified with the case name, case number, and the number of the category. If the debtor is married, state whether husband, wife, both, or the marital community own the property by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the debtor is an individual or a joint petition is filed, state the amount of any exemptions claimed only in Schedule C - Property Claimed as Exempt.

Do not list interests in executory contracts and unexpired leases on this schedule. List them in Schedule G - Executory Contracts and Unexpired Leases.

If the property is being held for the debtor by someone else, state that person's name and address under "Description and Location of Property." If the property is being held for a minor child, simply state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

| | Type of Property | N O Description and Location of Property E | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property without Deducting any Secured Claim or Exemption |
|-----|--|--|---|--|
| 1. | Cash on hand | X | | |
| 2. | Checking, savings or other financial accounts, certificates of deposit, or | Checking Account PNC Bank | - | 20.00 |
| | shares in banks, savings and loan, thrift, building and loan, and homestead associations, or credit unions, brokerage houses, or cooperatives. | Savings Account PNC Bank | - | 20.00 |
| 3. | Security deposits with public utilities, telephone companies, landlords, and others. | Х | | |
| 4. | Household goods and furnishings, including audio, video, and computer equipment. | T.V., & Furniture | - | 2,000.00 |
| 5. | Books, pictures and other art objects, antiques, stamp, coin, record, tape, compact disc, and other collections or collectibles. | X | | |
| 6. | Wearing apparel. | Normal Apparel | - | 200.00 |
| 7. | Furs and jewelry. | х | | |
| 8. | Firearms and sports, photographic, and other hobby equipment. | х | | |
| 9. | Interests in insurance policies. Name insurance company of each policy and itemize surrender or refund value of each. | Life Insurance Policies Term Death Benefit Only | - | 0.00 |
| 10. | Annuities. Itemize and name each issuer. | х | | |
| | | | | |
| | | (То | Sub-Totatal of this page) | al > 2,240.00 |

2 continuation sheets attached to the Schedule of Personal Property

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 10 of 50

B6B (Official Form 6B) (12/07) - Cont.

| In re | Carmen Gonzalez | Case No. |
|-------|-----------------|----------|
| | | |

Debtor

SCHEDULE B - PERSONAL PROPERTY (Continuation Sheet)

| | | | (Continuation Sheet) | | |
|-----|---|------------------|--------------------------------------|---|---|
| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
| 11. | Interests in an education IRA as defined in 26 U.S.C. § 530(b)(1) or under a qualified State tuition plan as defined in 26 U.S.C. § 529(b)(1). Give particulars. (File separately the record(s) of any such interest(s). 11 U.S.C. § 521(c).) | X | | | |
| 12. | Interests in IRA, ERISA, Keogh, or other pension or profit sharing plans. Give particulars. | ERI 403 | SA Qualified b | - | 33,220.00 |
| 13. | Stock and interests in incorporated and unincorporated businesses. Itemize. | X | | | |
| 14. | Interests in partnerships or joint ventures. Itemize. | X | | | |
| 15. | Government and corporate bonds and other negotiable and nonnegotiable instruments. | X | | | |
| 16. | Accounts receivable. | X | | | |
| 17. | Alimony, maintenance, support, and property settlements to which the debtor is or may be entitled. Give particulars. | X | | | |
| 18. | Other liquidated debts owed to debtor including tax refunds. Give particulars. | X | | | |
| 19. | Equitable or future interests, life estates, and rights or powers exercisable for the benefit of the debtor other than those listed in Schedule A - Real Property. | X | | | |
| 20. | Contingent and noncontingent interests in estate of a decedent, death benefit plan, life insurance policy, or trust. | X | | | |
| 21. | Other contingent and unliquidated claims of every nature, including tax refunds, counterclaims of the debtor, and rights to setoff claims. Give estimated value of each. | X | | | |
| | | | | Sub-Tota | al > 33,220.00 |
| | | | (To | tal of this page) | · |

Sheet <u>1</u> of <u>2</u> continuation sheets attached to the Schedule of Personal Property

B6B (Official Form 6B) (12/07) - Cont.

| In re | Carmen Gonzalez | Case No. |
|-------|-----------------|----------|
| | | · |

Debtor

SCHEDULE B - PERSONAL PROPERTY

(Continuation Sheet)

| | Type of Property | N O N E | Description and Location of Property | Husband, Wife, Joint, or Community | Current Value of Debtor's Interest in Property, without Deducting any Secured Claim or Exemption |
|-----|---|------------------|--------------------------------------|---|---|
| 22. | Patents, copyrights, and other intellectual property. Give particulars. | Х | | | |
| 23. | Licenses, franchises, and other general intangibles. Give particulars. | X | | | |
| 24. | Customer lists or other compilations containing personally identifiable information (as defined in 11 U.S.C. § 101(41A)) provided to the debtor by individuals in connection with obtaining a product or service from the debtor primarily for personal, family, or household purposes. | X | | | |
| 25. | Automobiles, trucks, trailers, and | 20 | 02 Cadillac EXT | - | 3,000.00 |
| | other vehicles and accessories. | 19 | 95 Chevrolet Pickup | - | 300.00 |
| 26. | Boats, motors, and accessories. | X | | | |
| 27. | Aircraft and accessories. | X | | | |
| 28. | Office equipment, furnishings, and supplies. | X | | | |
| 29. | Machinery, fixtures, equipment, and supplies used in business. | X | | | |
| 30. | Inventory. | X | | | |
| 31. | Animals. | X | | | |
| 32. | Crops - growing or harvested. Give particulars. | X | | | |
| 33. | Farming equipment and implements. | X | | | |
| 34. | Farm supplies, chemicals, and feed. | X | | | |
| 35. | Other personal property of any kind not already listed. Itemize. | X | | | |

Sub-Total > (Total of this page)

3,300.00

Total >

38,760.00

Sheet **2** of **2** continuation sheets attached to the Schedule of Personal Property

(Report also on Summary of Schedules)

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 12 of 50

B6C (Official Form 6C) (4/13)

| In re | Carmen Gonzalez | Case No | |
|-------|-----------------|---------|--|
| - | | Debtor | |

SCHEDULE C - PROPERTY CLAIMED AS EXEMPT

Debtor claims the exemptions to which debtor is entitled under:

(Check one box)

11 U.S.C. §522(b)(2)

11 U.S.C. §522(b)(3)

Check if debtor claims a homestead exemption that exceeds \$155,675. (Amount subject to adjustment on 4/1/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.)

| 1 1 0.5.e. \$522(0)(5) | | | |
|---|--|----------------------------------|---|
| Description of Property | Specify Law Providing Each Exemption | Value of Claimed Exemption | Current Value of Property Without Deducting Exemption |
| Real Property Single Family Home 20666 N. Margaret Ave. Lincolnshire, IL 60069 | 735 ILCS 5/12-901 | 15,000.00 | 219,402.00 |
| Checking, Savings, or Other Financial Accounts, Checking Account PNC Bank | Certificates of Deposit 735 ILCS 5/12-1001(b) | 20.00 | 20.00 |
| Savings Account PNC Bank | 735 ILCS 5/12-1001(b) | 20.00 | 20.00 |
| Household Goods and Furnishings T.V., & Furniture | 735 ILCS 5/12-1001(b) | 2,000.00 | 2,000.00 |
| Wearing Apparel Normal Apparel | 735 ILCS 5/12-1001(a) | 200.00 | 200.00 |
| Interests in Insurance Policies Life Insurance Policies Term Death Benefit Only | 215 ILCS 5/238 | 0.00 | 0.00 |
| Interests in IRA, ERISA, Keogh, or Other Pension ERISA Qualified 403b | or Profit Sharing Plans 735 ILCS 5/12-1006 | 33,220.00 | 33,220.00 |
| Automobiles, Trucks, Trailers, and Other Vehicles 2002 Cadillac EXT | 5 735 ILCS 5/12-1001(c) | 2,400.00 | 3,000.00 |
| 1995 Chevrolet Pickup | 735 ILCS 5/12-1001(b) | 300.00 | 300.00 |

| Total: | 53.160.00 | 258.162.00 |
|--------|-----------|------------|

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Page 13 of 50 Document

B6D (Official Form 6D) (12/07)

| In re | Carmen Gonzalez | Case No |
|-------|-----------------|---------|
| | | ; |
| | | Debtor |

SCHEDULE D - CREDITORS HOLDING SECURED CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number of all entities holding claims secured by property of the debtor as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. List creditors holding all types of secured interests such as judgment liens, garnishments, statutory liens, mortgages, deeds of trust, and other security interests.

other security interests.

List creditors in alphabetical order to the extent practicable. If a minor child is a creditor, the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). If all secured creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor", include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H", "W", "J", or "C" in the column labeled "Husband, Wife, Joint, or Community".

If the claim is contingent, place an "X" in the column labeled "Contingent". If the claim is unliquidated, place an "X" in the column labeled "Unliquidated". If the claim is disputed, place an "X" in the column labeled "Disputed". (You may need to place an "X" in more than one of these three columns.)

Total the columns labeled "Amount of Claim Without Deducting Value of Collateral" and "Unsecured Portion, if Any" in the boxes labeled "Total(s)" on the last sheet of the completed schedule. Report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report the total from the column labeled "Unsecured Portion" on the Statistical Summary of Certain Liabilities and Related Data.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

Check this box if debtor has no creditors holding secured claims to report on this Schedule D.

| | _ | | | | _ | | | |
|--|----------|------------------------|--|----------------|-----------|----------|--|---------------------------------|
| CREDITOR'S NAME AND MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu H W J C | sband, Wife, Joint, or Community DATE CLAIM WAS INCURRED, NATURE OF LIEN, AND DESCRIPTION AND VALUE OF PROPERTY SUBJECT TO LIEN | G | DZLLQULDA | DISPUTED | AMOUNT OF CLAIM WITHOUT DEDUCTING VALUE OF COLLATERAL | UNSECURED PORTION, IF ANY |
| Account No. xxxxx9112 | | | 5/06 - 5/10 | Т | DATED | | | |
| Chase Mortgage PO Box 24696 Columbus, OH 43224 | | - | 2nd Mortgage Balance Single Family Home 20666 N. Margaret Ave. Lincolnshire, IL 60069 | | D | x | | |
| | | | Value \$ 219,402.00 | | | | 9,000.00 | 9,000.00 |
| Account No. xxxxxx5675 | | | 5/06 - 1/15 | | | | | |
| Ocwen Loan Servicing, LLC 1661 Worthington Rd., Ste.100 West Palm Beach, FL 33409 | | - | Mortgage Balance Single Family Home 20666 N. Margaret Ave. Lincolnshire, IL 60069 | | | x | | |
| | | | Value \$ 219,402.00 | 1 | | | 224,305.00 | 4,903.00 |
| Account No. | | | Value \$ | | | | | |
| Account No. | | | | | | | | |
| | | | Value \$ | | | | | |
| _0 continuation sheets attached | | | S (Total of t | Subto his p | | | 233,305.00 | 13,903.00 |
| | | | (Report on Summary of Sc | To hedu | | _ | 233,305.00 | 13,903.00 |

3/18/15 9:55AM

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 14 of 50

B6E (Official Form 6E) (4/13)

| In re | Carmen Gonzalez | Case No. | |
|-------|-----------------|----------|--|
| - | | Debtor | |

SCHEDULE E - CREDITORS HOLDING UNSECURED PRIORITY CLAIMS

A complete list of claims entitled to priority, listed separately by type of priority, is to be set forth on the sheets provided. Only holders of unsecured claims entitled to priority should be listed in this schedule. In the boxes provided on the attached sheets, state the name, mailing address, including zip code, and last four digits of the account number, if any, of all entities holding priority claims against the debtor or the property of the debtor, as of the date of the filing of the petition. Use a separate continuation sheet for each type of priority and label each with the type of priority.

The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H-Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community." If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of claims listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all claims listed on this Schedule E in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules.

Report the total of amounts entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

Report the total of amounts not entitled to priority listed on each sheet in the box labeled "Subtotals" on each sheet. Report the total of all amounts not entitled to priority listed on this Schedule E in the box labeled "Totals" on the last sheet of the completed schedule. Individual debtors with primarily consumer debts report this total also on the Statistical Summary of Certain Liabilities and Related Data.

| Check this box it debtor has no creditors holding unsecured priority claims to report on this schedule E. |
|---|
| TYPES OF PRIORITY CLAIMS (Check the appropriate box(es) below if claims in that category are listed on the attached sheets) |
| Domestic support obligations Claims for domestic support that are owed to or recoverable by a spouse, former spouse, or child of the debtor, or the parent, legal guardian, or responsible relation of such a child, or a governmental unit to whom such a domestic support claim has been assigned to the extent provided in 11 U.S.C. § 507(a)(1). |
| □ Extensions of credit in an involuntary case Claims arising in the ordinary course of the debtor's business or financial affairs after the commencement of the case but before the earlier of the appointment of trustee or the order for relief. 11 U.S.C. § 507(a)(3). |
| Wages, salaries, and commissions Wages, salaries, and commissions, including vacation, severance, and sick leave pay owing to employees and commissions owing to qualifying independent sale representatives up to \$12,475* per person earned within 180 days immediately preceding the filing of the original petition, or the cessation of business, whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(4). |
| ☐ Contributions to employee benefit plans Money owed to employee benefit plans for services rendered within 180 days immediately preceding the filing of the original petition, or the cessation of busine whichever occurred first, to the extent provided in 11 U.S.C. § 507(a)(5). |
| ☐ Certain farmers and fishermen Claims of certain farmers and fishermen, up to \$6,150* per farmer or fisherman, against the debtor, as provided in 11 U.S.C. § 507(a)(6). |
| ☐ Deposits by individuals Claims of individuals up to \$2,775* for deposits for the purchase, lease, or rental of property or services for personal, family, or household use, that were not delivered or provided. 11 U.S.C. § 507(a)(7). |
| ☐ Taxes and certain other debts owed to governmental units Taxes, customs duties, and penalties owing to federal, state, and local governmental units as set forth in 11 U.S.C. § 507(a)(8). |
| Commitments to maintain the capital of an insured depository institution Claims based on commitments to the FDIC, RTC, Director of the Office of Thrift Supervision, Comptroller of the Currency, or Board of Governors of the Federal Reserve System, or their predecessors or successors, to maintain the capital of an insured depository institution. 11 U.S.C. § 507 (a)(9). |
| Claims for death or personal injury while debtor was intoxicated Claims for death or personal injury resulting from the operation of a motor vehicle or vessel while the debtor was intoxicated from using alcohol, a drug or |

another substance. 11 U.S.C. § 507(a)(10).

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 15 of 50

B6F (Official Form 6F) (12/07)

| In re | Carmen Gonzalez | Case No. |
|-------|-----------------|----------|
| _ | | Debtor |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

State the name, mailing address, including zip code, and last four digits of any account number, of all entities holding unsecured claims without priority against the debtor or the property of the debtor, as of the date of filing of the petition. The complete account number of any account the debtor has with the creditor is useful to the trustee and the creditor and may be provided if the debtor chooses to do so. If a minor child is a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m). Do not include claims listed in Schedules D and E. If all creditors will not fit on this page, use the continuation sheet provided.

If any entity other than a spouse in a joint case may be jointly liable on a claim, place an "X" in the column labeled "Codebtor," include the entity on the appropriate schedule of creditors, and complete Schedule H - Codebtors. If a joint petition is filed, state whether the husband, wife, both of them, or the marital community may be liable on each claim by placing an "H," "W," "J," or "C" in the column labeled "Husband, Wife, Joint, or Community."

If the claim is contingent, place an "X" in the column labeled "Contingent." If the claim is unliquidated, place an "X" in the column labeled "Unliquidated." If the claim is disputed, place an "X" in the column labeled "Disputed." (You may need to place an "X" in more than one of these three columns.)

Report the total of all claims listed on this schedule in the box labeled "Total" on the last sheet of the completed schedule. Report this total also on the Summary of Schedules and, if the debtor is an individual with primarily consumer debts, report this total also on the Statistical Summary of Certain Liabilities and Related Data.

☐ Check this box if debtor has no creditors holding unsecured claims to report on this Schedule F.

| CREDITOR'S NAME, | c | Нι | sband, Wife, Joint, or Community | CO | U | D | |
|--|----------|-------------|----------------------------------|----------|-----------|-----------------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A H | | ONTINGEN | NLIQUIDAT | D I S P U T E D | AMOUNT OF CLAIN |
| Account No. xx xx 4483 | | | 8/11 Judgment/Collections | Ť | TED | | |
| American Express Bank FSB c/o Lake Law Magistrate 18 N. County St. Waukegan, IL 60085 | | - | Judgment/Collections | | | | 1,261.00 |
| Account No. xxxx-xxxx-xxx3-008 | | | 2011 - 2015 | | | | |
| AMEX Bankruptcy Department PO Box 981535 El Paso, TX 79998-1535 | | - | Purchases | | | | 1,505.00 |
| Account No. xx0688 | | | 3/11 - 1/15 | | | | , |
| ASPEN 125 Shiller Place Itasca, IL 60143 | | - | Collections | | | | 3,013.00 |
| Account No. xx xR 372 | | | 6/09 - 3/13 | | <u> </u> | | |
| Asset Acceptance Bankruptcy Department PO Box 2036 Warren, MI 48090 | | - | Judgment | | | | |
| | | | | | | | 18,164.00 |
| 5 continuation sheets attached | | | | Sub | | | 23,943.00 |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 16 of 50

B6F (Official Form 6F) (12/07) - Cont.

| In re | Carmen Gonzalez | | Case No. | |
|-------|-----------------|--------|----------|--|
| _ | | Debtor | | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | Hu H W J C | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | UZLLQULDAT | D I S P U T E D | : | AMOUNT OF CLAIM |
|--|----------|---------------|---|------------|-------------|-----------------|---------|-----------------|
| Account No. xxxxx2365 | | | 11/10 |] T | T E D | | | |
| AT&T U-Verse PO Box 1826 Alpharetta, GA 30023-1826 | | - | Collections | | | | | 1,127.00 |
| Account No. xxxxxx-xx-xxx192-4 | | | 6/09 | | T | T | T | |
| Beneficial Finance PO Box 3425 Buffalo, NY 14240-9733 | | - | Purchases | | | | | |
| | L | | | L | L | L | \perp | 16,745.00 |
| Account No. xxxx-xxxx-xxxx-3243 Bill Me Later Correspondence PO Box 2394 Omaha, NE 68103-2394 | - | - | 7/09 Loan | | | | | 706.00 |
| Account No. xx xx 4715 Cach LLC 4340 S. Monaco, Second Floor Denver, CO 80237 | | - | 8/10 Judgment | | | | | 2,184.00 |
| Account No. xx xx 8993 Cap One Bankruptcy Dept. PO Box 5155 Norcross, GA 30091 | | - | 7/09 - 11/10 Judgment | | | | | 6,748.00 |
| Sheet no. <u>1</u> of <u>5</u> sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | | | (Total of | Sub | | | | 27,510.00 |
| Creditors holding Unsecured Nondriority Claims | | | (I otal of | allS | υas | 201 | / I | |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 17 of 50

B6F (Official Form 6F) (12/07) - Cont.

| In re | Carmen Gonzalez | Case No. | |
|-------|-----------------|----------|--|
| _ | | Debtor | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| CDEDITOD'S NAME | С | Hu | sband, Wife, Joint, or Community | С | U | D | | |
|--|----------|-------------|---|-----------|--------------|----------|-----|---------------|
| CREDITOR'S NAME, MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | J M H | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTLNGEN | UNLIQUIDATED | DISPUTED | AMO | OUNT OF CLAIM |
| Account No. xx xx # xxxx-xxxx 9913 | | | 7/23 08 - 11/28/12 | 7 | T | | | |
| CCS PO Box 88 Bremen, GA 30110 | | - | Auto Accident | | D | | _ | |
| Account No. xx xx xxxx & xxxxxxxxxxxx3196 | 1 | | 10/10 | + | <u> </u> | | | 5,367.00 |
| Chasecard Bankruptcy Department PO Box 15298 Wilmington, DE 19850 | | - | Judgment | | | | | |
| | | | | | | | | 2,971.00 |
| Account No. xx xx 9341 Chrysler 27777 Franklin Rd. Southfield, MI 48034 | | - | 3/10 - 11/10 Judgment | | | | | 8,509.00 |
| Account No. xxxx-xxxx-5289 Citi Attn: Bankruptcy Department PO Box 6241 Sioux Falls, SD 57717 | | - | 6/09 Purchases | | | | | 3,333.00 |
| Account No. x1201 Citibank South Dakota N c/o Asset Acceptance PO Box 1630 Warren, MI 48090 | - | _ | 1/11 - 32/15 Collections | | | | | 3,333.00 |
| Trairen, IIII 70000 | | | | | | | | 5,673.00 |
| Sheet no. 2 of 5 sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | f | | (Total of | Sub | | | | 25,853.00 |

Creditors Holding Unsecured Nonpriority Claims

(Total of this page)

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 18 of 50

B6F (Official Form 6F) (12/07) - Cont.

| In re | Carmen Gonzalez | Case No | _ |
|-------|-----------------|---------|---|
| _ | | Debtor | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| CREDITOR'S NAME, | Ç | Hu | sband, Wife, Joint, or Community | C | U | D | |
|--|----------|-------------|---|-----------------|-------------|---------|-----------------|
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C J M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | O N T I N G E N | LIQUID | ISPUTED | AMOUNT OF CLAIN |
| Account No. xxx3673 | | | 4/13 - 6/14 | Т | A T E | | |
| Dish Network c/o Stellar Recovery 1327 Highway 2 West Ste. 100 Kalispell, MT 59901 | | - | Collections | | D | | 93.00 |
| Account No. xxxx-xxxx-5472 | t | | 5/09 | | \dagger | T | |
| GE Money Bank Attn: Bankruptcy Dept PO Box 103104 Roswell, GA 30076 | | _ | Purchases | | | | 7,717.00 |
| Account No. xxxx4524 | t | | 7/13 - 2/15 | | t | T | |
| GECRB PO. BOX 960013 Orlando, FL 32896 | | _ | Collections | | | | 8,235.00 |
| Account No. xx3276 | ┪ | | 9/09 - 2/15 | | | T | |
| HSBC Bank Bankrupty Department PO Box 5226 Carol Stream, IL 60197-5226 | | _ | Collections | | | | 1,620.00 |
| Account No. xxxxxxxx7294 | t | H | 4/10 - 2/15 | - | t | + | |
| HSBC Bank Nevada N.A. c/o Portfolio Recovery Associates 120 Corporate Blvd., Ste. 100 Norfolk, VA 23502 | - | _ | Collections | | | | 3,538.00 |
| Sheet no. 3 of 5 sheets attached to Schedule of | _ | | | Sub | tota | al | 2, 222 22 |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total | | | | 21,203.00 |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 19 of 50

B6F (Official Form 6F) (12/07) - Cont.

| In re | Carmen Gonzalez | | Case No. | |
|-------|-----------------|--------|----------|--|
| _ | | Debtor | | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS (Continuation Sheet)

| | _ | | | 1. | l | _ | |
|--|---------|----------|---|----------|-----------------------|------------|-----------------|
| CREDITOR'S NAME, | СОДШВТО | | sband, Wife, Joint, or Community | CON | ロアコーダン | DI | |
| MAILING ADDRESS INCLUDING ZIP CODE, | E | H W | DATE CLAIM WAS INCURRED AND | T | ļ | ISPUTE | |
| AND ACCOUNT NUMBER | T | J | CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | | χ - C | Ţ | AMOUNT OF CLAIM |
| (See instructions above.) | R | С | is sobject to seroit, so state. | N G E N | | D | |
| Account No. xxxx-xxxx-xxxx-8798 | | | 8/09 | | D A T E D | | |
| | | | Purchases | | D | | |
| HSBC Card Services | | | | | | | |
| PO Box 17051 | | - | | | | | |
| Baltimore, MD 21297-1051 | | | | | | | |
| | | | | | | | 1,225.00 |
| Account No. xxxxxxxx6042 | | | 11/01 - 1/12 | t | | | |
| | | | Purchases | | | | |
| Kohls/CAP1 | | | | | | | |
| PO Box 3115 Milwaukee, WI 53201-3115 | | - | | | | | |
| Wilwadkee, Wi 33201-3113 | | | | | | | |
| | | | | | | | 1,451.00 |
| Account No. xxxx6702 | | | 7/13 | | | | |
| | | | Collections | | | | |
| Northwest Community Hospital | | | | | | | |
| c/o Harris & Harris LTD | | - | | | | | |
| 111 W. Jackson Blvd., Ste. 400 | | | | | | | |
| Chicago, IL 60604 | | | | | | | 1,080.00 |
| 1000 | | | 044 | | | | 1,000.00 |
| Account No. xx xx 4000 | | | 8/11 Judgment | | | | |
| Portfolio Recovery Associates | | | Judgment | | | | |
| 120 Corporate Blvd., Ste. 100 | | _ | | | | | |
| Norfolk, VA 23502 | | | | | | | |
| | | | | | | | |
| | | | | | | | 3,271.00 |
| Account No. xxxxxx xx xx 9341 | | | 8/06 - 11/10 | | | | |
| | | | Judgment | | | | |
| TD Auto Finance | | _ | | | | | |
| PO Box 9223 Farmington, MI 48333-9223 | | | | | | | |
| 1 a.m.igton, iiii 1 0000-9220 | | | | | | | |
| | | | | | | | 8,056.00 |
| Sheet no4 of _5 sheets attached to Schedule of | | <u> </u> | 1 | Sub | toto | | |
| Creditors Holding Unsecured Nonpriority Claims | | | (Total of t | | | | 15,083.00 |
| Creations froming offsecured Nonphority Claims | | | (1018101) | 1118 | pag | <i>(</i>) | |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 20 of 50

B6F (Official Form 6F) (12/07) - Cont.

| In re | Carmen Gonzalez | Case No | |
|-------|-----------------|---------|--|
| - | | Debtor | |

SCHEDULE F - CREDITORS HOLDING UNSECURED NONPRIORITY CLAIMS

(Continuation Sheet)

| | | _ | | | | | | |
|---|----------|-------------|---|------------|--------------|--------|-----------|-----------------|
| CREDITOR'S NAME, | C | Hu | sband, Wife, Joint, or Community | C | U | D | Т | |
| MAILING ADDRESS INCLUDING ZIP CODE, AND ACCOUNT NUMBER (See instructions above.) | CODEBTOR | C A M | DATE CLAIM WAS INCURRED AND CONSIDERATION FOR CLAIM. IF CLAIM IS SUBJECT TO SETOFF, SO STATE. | CONTINGENT | QU | SPUTED | | AMOUNT OF CLAIM |
| Account No. xxxxxxxxxxxxx6150 | Г | П | 9/09 - 2/15 |]⊤ | ΙE | 1 | | |
| Wells Fargo Bank NA c/o CACH, LLC 4340 S. Monaco St., Unit 2 Denver, CO 80237 | | - | Collections | | D | | - | 1,915.00 |
| Account No. xxxx1381 | T | T | 10/12 - 1.15 | T | | T | \top | |
| Wells Fargo Financial Bank c/o LVNV Funding, LLC PO Box 10497 Greenville, SC 29603 | • | - | Collections | | | | | 123.00 |
| Account No. xxxx8006 | ╀ | ⊢ | 12/12 - 1/158 | + | ╁ | ╀ | + | |
| Wells Fargo Financial Bank c/o LVNV Funding, LLC PO Box 10497 Greenville, SC 29603 | | - | Collections | | | | | |
| | | | | | | | | 160.00 |
| Account No. xxxx-xxxx-xxxx-5109 | T | | 7/09 Purchases | \perp | | | \dagger | |
| Wells Fargo Financial Cards PO Box 98791 Las Vegas, NV 89193-8791 | | - | ruiciiases | | | | | |
| | | | | | | | | 2,011.00 |
| Account No. | Γ | | | T | | | | |
| | | | | | | | | |
| Sheet no 5 _ of _ 5 _ sheets attached to Schedule of Creditors Holding Unsecured Nonpriority Claims | - | | (Total of t | Sub | | | T | 4,209.00 |
| Creations froming Onsecuted Nonphority Claims | | | (Total of t | | | | \vdash | |
| | | | (Report on Summary of So | | Γota dule | | | 117,801.00 |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main Document Page 21 of 50

B6G (Official Form 6G) (12/07)

| In re | Carmen Gonzalez | Case No. |
|-------|-----------------|----------|
| - | | Debtor , |

SCHEDULE G - EXECUTORY CONTRACTS AND UNEXPIRED LEASES

Describe all executory contracts of any nature and all unexpired leases of real or personal property. Include any timeshare interests. State nature of debtor's interest in contract, i.e., "Purchaser", "Agent", etc. State whether debtor is the lessor or lessee of a lease. Provide the names and complete mailing addresses of all other parties to each lease or contract described. If a minor child is a party to one of the leases or contracts, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

■ Check this box if debtor has no executory contracts or unexpired leases.

Name and Mailing Address, Including Zip Code, of Other Parties to Lease or Contract

Description of Contract or Lease and Nature of Debtor's Interest. State whether lease is for nonresidential real property. State contract number of any government contract. Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18

Document Page 22 of 50

B6H (Official Form 6H) (12/07)

| In re | Carmen Gonzalez | Case No. |
|-------|-----------------|----------|
| - | Carmen Conzalez | Debtor |

SCHEDULE H - CODEBTORS

Provide the information requested concerning any person or entity, other than a spouse in a joint case, that is also liable on any debts listed by debtor in the schedules of creditors. Include all guarantors and co-signers. If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within the eight year period immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resided with the debtor in the community property state, commonwealth, or territory. Include all names used by the nondebtor spouse during the eight years immediately preceding the commencement of this case. If a minor child is a codebtor or a creditor, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. §112 and Fed. R. Bankr. P. 1007(m).

Check this box if debtor has no codebtors.

NAME AND ADDRESS OF CODEBTOR

NAME AND ADDRESS OF CREDITOR

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main $_{3/18/15}$ 9.56AM Document Page 23 of 50

| | | | | | _ | | | | |
|-------------|---|----------------------------|---------------------------------------|--------------|-------------|---|---------------|------------------------|------------|
| | in this information to identify your countries. Carmen Gol | | | | | | | | |
| | <u> </u> | | | | | | | | |
| _ | btor 2 buse, if filing) | | | | | | | | |
| Uni | ited States Bankruptcy Court for the | : NORTHERN DISTRIC | CT OF ILLINOIS | | | | | | |
| | se number nown) | | | | | ck if this is: An amende A suppleme | ed filing | g post-petitio | on chapter |
| \sim | fficial Forms D.Cl | | | | | | | ollowing date | |
| | <u>fficial Form B 6l</u> chedule I: Your Inc | | | | Ī | MM / DD/ Y | YYY | | 12/1 |
| spo atta | plying correct information. If you use. If you are separated and you ch a separate sheet to this form. Describe Employment | ır spouse is not filing w | ith you, do not includ | le informati | on abou | t your spo | ouse. If mo | re space is | needed, |
| 1. | Fill in your employment information. | | Debtor 1 | | | Debtor 2 | or non-fil | ling spouse | |
| | If you have more than one job, | Employment status | ■ Employed | | | ☐ Empl | oyed | | |
| | attach a separate page with information about additional | p.o,o o.u.uo | ☐ Not employed Maintenance | | | ☐ Not e | mployed | | |
| | employers. | Occupation | | | | | | | |
| | Include part-time, seasonal, or self-employed work. | Employer's name | Maryville Acader | my | | | | | |
| | Occupation may include student or homemaker, if it applies. | Employer's address | 1150 N. River Ro Des Plaines, IL 6 | | | | | | |
| | | How long employed t | here? <u>11 Years</u> | 3 | | _ | | | |
| Pai | rt 2: Give Details About Mo | nthly Income | | | | | | | |
| | imate monthly income as of the duse unless you are separated. | ate you file this form. If | you have nothing to re | port for any | line, write | e \$0 in the | space. Inc | lude your no | n-filing |
| | ou or your non-filing spouse have mee space, attach a separate sheet to | | ombine the information | for all empl | oyers for | that perso | on on the lir | nes below. If | you need |
| | | | | | For De | btor 1 | | otor 2 or ng spouse | |
| 2. | List monthly gross wages, sala deductions). If not paid monthly, | | | 2. \$ | 2 | 2,356.00 | \$ | N/A | - |
| 3. | Estimate and list monthly overt | ime pay. | | 3. +\$ | | 0.00 | +\$ | N/A | <u>-</u> |
| 1 | Calculate gross Income Add li | no 2 + lino 3 | | 4 ¢ | 2 2 | 56.00 | \$ | N/A | |

| Debt | or 1 | Carmen Gonzalez | - | Case n | umber (if known) | | | |
|------|-------------------------------|--|------------|-------------|----------------------|-------------------|-------------------------------|--------|
| | Cor | by line 4 here | 4. | For E | 2,356.00 | | otor 2 or ng spouse N/A | |
| _ | · | | ٦. | Ψ | 2,330.00 | Ψ | <u> NA</u> | |
| 5. | | all payroll deductions: | | | | | | |
| | 5a. | Tax, Medicare, and Social Security deductions | 5a. | \$ | 506.00 | \$ | N/A | |
| | 5b. | Mandatory contributions for retirement plans | 5b. | \$ <u> </u> | 0.00 | \$ | N/A | |
| | 5c. | Voluntary contributions for retirement plans | 5c. | \$ <u> </u> | 0.00 | \$ | N/A | |
| | 5d. | Required repayments of retirement fund loans | 5d. | \$ | 0.00 | »—— | N/A | |
| | 5e. 5f. | Insurance Domestic support obligations | 5e. 5f. | \$ <u> </u> | 0.00 | \$ | N/A N/A | |
| | 5g. | Union dues | 5g. | \$ <u> </u> | 30.00 | \$ | N/A | |
| | 5h. | Other deductions. Specify: Nationwide 403B | 5h.+ | <u>\$</u> — | 260.00 | + \$ | N/A | |
| 6 | | | _ | · · · | | | | |
| 6. | | I the payroll deductions. Add lines 5a+5b+5c+5d+5e+5f+5g+5h. | 6. | \$ <u> </u> | 796.00 | \$ | N/A | |
| 7. | Cai | culate total monthly take-home pay. Subtract line 6 from line 4. | 7. | » — | 1,560.00 | \$ | N/A | |
| 8. | List 8a. | All other income regularly received: Net income from rental property and from operating a business, profession, or farm Attach a statement for each property and business showing gross receipts, ordinary and necessary business expenses, and the total | | | | | | |
| | 01 | monthly net income. | 8a. | \$ | 0.00 | \$ | N/A | |
| | 8b. 8c. | Interest and dividends Family support payments that you, a non-filing spouse, or a dependent regularly receive | 8b. | » <u>—</u> | 0.00 | \$ | N/A | |
| | | Include alimony, spousal support, child support, maintenance, divorce settlement, and property settlement. | 8c. | \$ | 0.00 | \$ | NI/A | |
| | 8d. | Unemployment compensation | 8d. | \$ <u> </u> | 0.00 | \$ | N/A N/A | |
| | 8e. | Social Security | 8e. | <u>\$</u> — | 0.00 | <u>\$</u> | N/A | |
| | 8f. | Other government assistance that you regularly receive Include cash assistance and the value (if known) of any non-cash assistance that you receive, such as food stamps (benefits under the Supplemental Nutrition Assistance Program) or housing subsidies. Specify: | e 8f. | \$ | 0.00 | \$ | N/A | |
| | 8g. | Pension or retirement income | 8g. | \$ | 0.00 | \$ | N/A | |
| | 8h. | Other monthly income. Specify: | 8h.+ | \$ | 0.00 | + \$ | N/A | |
| 9. | Add | d all other income. Add lines 8a+8b+8c+8d+8e+8f+8g+8h. | 9. | \$ | 0.00 | \$ | N/A | |
| 10 | Cald | culate monthly income. Add line 7 + line 9. | 10. \$ | 1 | ,560.00 + \$ | | I/A = \$ 1, | 560.00 |
| | | I the entries in line 10 for Debtor 1 and Debtor 2 or non-filing spouse. | - | - ' | , ,500.00 | • | <u>"A</u> | 300.00 |
| 11. | Stat Inclu othe Do i | te all other regular contributions to the expenses that you list in Schedule ude contributions from an unmarried partner, members of your household, your er friends or relatives. not include any amounts already included in lines 2-10 or amounts that are not accify: | depend | | | ed in <i>Sche</i> | edule J. 11. +\$ | 0.00 |
| 12. | | If the amount in the last column of line 10 to the amount in line 11. The rest that amount on the Summary of Schedules and Statistical Summary of Certain lies | | | | , if it | Combined | |
| 12 | Do : | you expect an increase or decrease within the year after you file this form | 2 | | | | monthly ir | ncome |
| 13. | | No. Yes. Explain: | • | | | | | |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main $_{3/18/15}$ 9.56AM Document Page 25 of 50

| | | | | | | - | | |
|-------|----------------------------------|-------------------------------------|-------------------|--|--|------------|-----------------------|-------------------------------|
| Fill | in this informa | ation to identify yo | our case: | | | | | |
| Deb | otor 1 | Carmen Gor | ızalez | | | Ch | eck if this is: | |
| | | | | | _ | | An amended filing | |
| | otor 2 | | | | | | | wing post-petition chapter |
| (Spo | ouse, if filing) | | | | | | 13 expenses as of | the following date: |
| Unit | ed States Bankı | ruptcy Court for the | : NORTH | ERN DISTRICT OF ILLIN | OIS | | MM / DD / YYYY | |
| Cas | e number | | | | | | A separate filing for | or Debtor 2 because Debtor |
| (If k | nown) | | | <u> </u> | | | 2 maintains a sepa | arate household |
| O | fficial Fo | rm B 6J | | | | | | |
| | | J: Your | _ Evnor | 1606 | | | | 40/4 |
| | | | | ISCS If two married people ar | a filing togathar b | ath ara an | uselly reemensible f | 12/1: |
| info | ormation. If m | | eded, atta | ch another sheet to this | | | | |
| Par | | ribe Your House | ∍hold | | | | | |
| 1. | Is this a joir | | | | | | | |
| | ■ No. Go to □ Yes. Doe | o line 2. es Debtor 2 live | in a separa | ate household? | | | | |
| | □N | lo | | | | | | |
| | ΠY | es. Debtor 2 mus | st file a sep | parate Schedule J. | | | | |
| 2. | Do you hav | e dependents? | ☐ No | | | | | |
| | Do not list D Debtor 2. | ebtor 1 and | ■ Yes. | Fill out this information for each dependent | Dependent's relat Debtor 1 or Debto | | Dependent's age | Does dependent live with you? |
| | Do not state | the | | | | | | □ No |
| | dependents' | names. | | | Son | | 24 | ■ Yes |
| | | | | | | | | □ No |
| | | | | | | | _ | ☐ Yes |
| | | | | | | | | □ No |
| | | | | | | | | Yes |
| | | | | | | | | □ No |
| 2 | Do your ove | noncos includo | _ | | | | | ☐ Yes |
| 3. | | penses include of people other t | han _ | No | | | | |
| | | d your depende | | Yes | | | | |
| D | , o | | · 84 (b. 1 | | | | | |
| Par | | nate Your Ongoi | | y Expenses uptcy filing date unless y | ou are using this f | orm as a s | supplement in a Ch | anter 13 case to report |
| exp | penses as of a plicable date. | a date after the | bankruptc | y is filed. If this is a supp | elemental Schedule | J, check | the box at the top of | of the form and fill in the |
| Inc | lude exnense | es naid for with | non-cash | government assistance i | f vou know | | | |
| | | | | cluded it on Schedule I: \ | | | | |
| (Of | ficial Form 6I | .) | | | | | Your exp | enses |
| 4. | | | | ses for your residence. | nclude first mortgag | e 4. | \$ | 1,359.00 |
| | | nd any rent for th | e grouna o | II IOL. | | ٦. | * | |
| | | ded in line 4: | | | | 4 - | ¢ | 0.00 |
| | | estate taxes erty, homeowner's | e or rentor | 'e ineurance | | 4a. 4b. | | 0.00 |
| | • | • | | s insurance ipkeep expenses | | 46. 4c. | | 50.00 0.00 |
| | | eowner's associa | | | | 4d. | | 0.00 |
| 5. | | | | our residence, such as ho | me equity loans | 5. | • | 47.00 |

| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Clother, Specity: 6d. S. 215.00 6d. Other. Specity: 7. \$ 300.00 6d. Other Specity: 9. \$ 10.00 6d. S. \$ 0.00 6d. | ebtor 1 | Carmen Gonzalez | Case num | per (if known) | |
|--|------------|--|----------|----------------|--------------------------|
| 6a. Electricity, heat, natural gas 6b. Water, sewer, garbage collection 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 215.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 215.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 215.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 215.00 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. S 215.00 6c. Telephone, cell phone, Internet, satellite, and cable services 7c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 7c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 7c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 7c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 7c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 8c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 8c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 8c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 8c. S 20.00 6c. Telephone, cell phone, Internet, satellite, and cable services 8c. S 20.00 6c. Telephone, cell phone, laterlite, and cable services 8c. S 20.00 6c. Telephone, cell phone, laterlite, and cable services 8c. S 20.00 6c. Telephone, cell phone, laterlite, and cable services 8c. S 20.00 6c. Telephone, cell phone, cell phone, services 8c. S 20.00 6c. Telephone, cell phone, services 8c. S 20.00 6c. Telephone, cell phone, services 8c. S 20.00 6c. Telephone, cell phone, services 8c. S 20.00 6c. S 20.00 6c. Telephone, cell phone, services 8c. S 20.00 6c. S 20.00 6c. Telephone, cell phone, services 8c. S 20.00 6c. S 20.00 6c. Telephone, cell phone, services 8c. S 20.00 6c. S 20.00 6c. Telephone, services 8c. S 20.00 6c. S 20.00 6c. Telephone, services 8c. | . Utilitie | es: | | | |
| 6b. Water, sewer, garbage collection 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 6c. Telephone, cell phone, Internet, satellite, and cable services 7c. Satellite, services 8c. Satellite, services 8c. Satellite, services 9c. | | | 6a. | \$ | 145.00 |
| 6c. Telephone, cell phone, Internet, satellite, and cable services 6d. Clother, Specity: 6d. S. 215.00 6d. Other. Specity: 7. \$ 300.00 6d. Other Specity: 9. \$ 10.00 6d. S. \$ 0.00 6d. | | • | | | |
| 6d. Che'r Specify: Food and housekeeping supplies Food and housekeeping supplies Food and housekeeping supplies 7. \$ 300.00 Clothing, laundry, and dry cleaning 9. \$ 100.00 Personal care products and services 10. \$ 0.00 Medical and dental expenses 11. \$ 0.00 Medical and certa payments. 12. \$ 80.00 Entertainment, clubs, erceation, newspapers, magazines, and books 13. \$ 0.00 Charitable contributions and religious donations 14. \$ 0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. To not include insurance deducted from your pay or included in lines 4 or 20. To hild insurance 15b. Health insurance 15b. \$ 0.00 Tis. Utel insurance 15b. \$ 0.00 Tis. Utel insurance 15b. \$ 0.00 Tis. Or the insurance specify. Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Tis. Life insurance. 15b. \$ 0.00 Tis. Or the insurance specify. Tis. Car payments for Vehicle 1 Tis. \$ 0.00 Tis. Or the insurance specify. The Car payments for Vehicle 2 Tis. \$ 0.00 Tis. Or the insurance specify. The Car payments for Vehicle 2 Tis. \$ 0.00 Tis. Or the insurance specify. Tis. \$ 0.00 Tis. Or the insurance specify. The Car payments for Vehicle 1 Tis. \$ 0.00 Tis. Or the insurance specify. Tis. \$ | | | | | |
| Food and housekeeping supplies Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services 10. \$.000 Rersonal care products and services 11. \$.000 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. See Life insurance 15b. Lealth insurance 15b. Lealth insurance 15b. \$.000 15b. Ushclie insurance 15c. \$.000 15d. Other insurance, speetly. 15d. Other insurance, speetly. 15d. Other insurance, speetly. 15d. Car payments for Vehicle 1 17a. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: Student Loan 17c. Other. Specify: Student Loan 17d. Other. Specify: Student Loan 17d. Other. Specify: Student Loan 17d. Other. Specify: Surphyenents of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 61) Other payments on the payments on the surphyenist of the surphyenist on the payment of the surphyenist on the payment of the surphyenist on the surphyenist on the surphyenist of the surphyenist on the surphyenist on the surphyenist on the payment of the surphyenist on the surphyenist on the surphyenist of the surphyenist on the surphyenist on the surphyenist of the surphyenist on the | | | | | |
| Childcare and children's education costs Clothing, laundry, and dry cleaning Personal care products and services 10. \$ 10.00 Medical and dental expenses 11. \$ 0.00 Medical and dental expenses 11. \$ 0.00 Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 15c. Vehicle insurance 15c. \$ 0.00 15c. Vehicle insurance specify: 15d. Other insurance. Specify: 16d. Other insurance. Specify: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17d. Corporates for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17d. Student Loan 17c. \$ 0.00 17d. Other. Specify: 17d. Student Loan 17d. S 0.00 17d. Other. Specify: 19urance of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6i). Specify: 19b. Specify: 19b | | | | · | |
| Clothing, laundry, and dry cleaning Personal care products and services 10. \$ 0.00 Medical and dental expenses 11. \$ 0.00 Transportation. Include gas, maintenance, bus or train fare. Do not include care payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S 0.00 15b. Health insurance 15c. Vehicle insurance 15c. S 0.00 15d. Other insurance, specify: 15d. Vehicle insurance 15c. S 0.00 15d. Other insurance, specify: 15d. S 0.00 15d. Other insurance, specify: 15d. S 0.00 15d. Other insurance, specify: 15d. S 0.00 15d. Other insurance, specify: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 1 17c. Car payments for Vehicle 2 17b. S 0.00 17d. Other, Specify: 17d. S 0.00 17d. Other | | . • | | · | |
| Personal care products and services Modical and dental expenses 11. \$ 0.00 Modical and dental expenses 11. \$ 0.00 Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance Do not include insurance deducted from your pay or included in lines 4 or 20. 15b. Health insurance 15c. \$ 0.00 15c. Vehicle insurance. 15d. Other insurance. 15d. Other insurance. 15d. Other insurance. 15d. Other insurance. 15d. S 0.00 15e. S 0.00 17exes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17d. Other specify: 17d. Other payments of vehicle 2 17d. Other. Specify: 17d. Other payments of vehicle 2 17d. Other. Specify: 17d. Other | | | | | |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 12. \$ 80.00 Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. \$ 0.00 15c. Vehicle insurances, Specify: 15c. Vehicle insurances, Specify: 15d. Other insurances, Specify: 15d. Other insurances, Specify: 15d. Spe | | | | | |
| Transportation. Include gas, maintenance, bus or train fare. Do not include car payments. Entertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Charitable contributions and religious donations 14. \$ 0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. \$ 0.00 15b. Health insurance 15c. Vehicle insurance 15d. Other insurance, Specify: 15d. Other insurance, Specify: 15d. Other insurance, Specify: 16a. Charitable continuition of lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Student Loan 17d. Other. Specify: 17d. Other specify: 17d. Other specify: 17d. | | · | | | |
| Do not include car payments. Fintertainment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Charitable contributions and religious donations 14. \$ 0.00 Insurance. Insurance | | • | 11. | Φ | 0.00 |
| Entertaliment, clubs, recreation, newspapers, magazines, and books 13. \$ 0.00 Charitable contributions and religious donations 14. \$ 0.00 Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15b. Health insurance 15b. \$ 0.00 15b. Vehicle insurance 15b. \$ 0.00 15b. Vehicle insurance 15c. \$ 40.00 15c. Vehicle insurance 15c. \$ 40.00 15c. \$ 40.00 15d. Other insurance, specify: 15d. Other insurance, specify: 16. \$ 0.00 15astallment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17b. Car payments for Vehicle 2 17c. \$ 70.00 17d. Other. Specify: 17d. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 17d. Other specify: 18deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18 \$ 0.00 19 \$ | | | 12. | \$ | 80.00 |
| Charitable contributions and religious donations Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. Health insurance 15c. Vehicle insurance 15c. Vehicle insurance. Specify: 15d. \$ 0.00 15d. Other insurance. Specify: 15d. \$ 0.00 15d. Other insurance. Specify: 15d. \$ 0.00 Installment or lease payments: Specify: 16c. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 Installment or lease payments: 17d. Car payments for Vehicle 2 17b. \$ 0.00 Installment or lease payments: 17d. Cher. Specify: 17d. Other. Specif | | 1 / | | · | 0.00 |
| Insurance. Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance | | | | · | |
| Do not include insurance deducted from your pay or included in lines 4 or 20. 15a. Life insurance 15b. S 0.00 15b. Health insurance 15c. S 40.00 15c. Vehicle insurance 15d. S 0.00 15d. Other insurance specify: 15d. S 0.00 15d. Other insurance. Specify: 17a. S 0.00 17b. Car payments for Vehicle 1 17a. S 0.00 17b. Car payments for Vehicle 2 17b. S 0.00 17c. Other. Specify: 17d. S 0.00 17d. S 0.00 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule 1, Your Income (Official Form 6i). 18. S 0.00 0ther payments you make to support others who do not live with you. S 0.00 0ther real property expenses not included in lines 4 or 5 of this form or on Schedule 1: Your Income. 20a. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 20b. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 0.00 20d. Homeowner's association or condominium dues 20e. S 20pur monthly expenses. Add lines 4 through 21. 15e. S 20pur monthly expenses. 21f. +\$ 0.00 22g. S 2481.00 23g. Copy line 12 (your combined monthly income) from Schedule 1. 23g. Subtract your monthly expenses from your monthly income. 17e result is your monthly expenses from your monthly income. 17e result is your monthly expenses from your monthly income. 17e result is your monthly expenses from your are loan within the year of do you expect your mortgage payment to incr | | • | | | 0.00 |
| 15a. Life insurance | | | | | |
| 15c. Vehicle insurance 15c. \$ 40.00 15d. Other insurance. Specify: 15d. \$ 0.00 Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 16. \$ 0.00 Installment or lease payments: 17a. \$ 0.00 17b. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: 17d. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 17d. Other. Specify: 17d. \$ 0.00 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6i). 18. \$ 0.00 17d. Other payments you make to support others who do not live with you. \$ 0.00 17d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 18d. Other payments you make to support others who do not live with you. \$ 0.00 18d. Real estate taxes 20b. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Haintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Haintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Homeowner's association or condominium dues 20e. \$ 0.00 20d. The result is your monthly expenses. Add lines 4 through 21. 22. \$ 2,481.00 20d. The result is your monthly net income. 23a. \$ 1,560.00 20d. Solution of the property of the payment to increase or decrease because of the payment to the terms of your monthly net income. 23c. \$ 0.00 20d. Note: Specify: 21d. Specify: 22d. Specify: 23d. Specify: | | | 15a. | \$ | 0.00 |
| 15c. Vehicle insurance 15c. \$ 40.00 15d. Other insurance. Specify: | 15b. | Health insurance | 15b. | \$ | 0.00 |
| 15d. Other insurance. Specify: Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: 17d. Other. Specify: 17d. Other. Specify: 17d. Student Loan 17d. \$ 0.00 17d. Other. Specify: 17d. Student Loan 17d. \$ 0.00 17d. Other specify: 17d. \$ 0.00 17d. Other payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6i). 01her payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Homeowner's association or condominium dues 20e. \$ 0.00 20her: Specify: 21. +\$ 0.00 21. +\$ 0.00 23a. \$ 1,560.00 23b. Capy your monthly expenses. Calculate your monthly expenses. Calculate your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. □ No. | 15c. | Vehicle insurance | 15c. | \$ | |
| Taxes. Do not include taxes deducted from your pay or included in lines 4 or 20. Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17b. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: Your payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6i). Other payments of allimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6i). Other payments you make to support others who do not live with you. Specify: 19. Other rall property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 Other: Specify: 21. +\$ 0.00 Other: Specify: 21. +\$ 0.00 Other: Specify: 22. \$ 2,481.00 The result is your monthly expenses. Calculate your monthly expenses from line 22 above. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,560.00 23b. Copy your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. The result is your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your montgage payment to increase or decrease because on modification to the terms of your mortgage? No. Yes. | 15d. | Other insurance. Specify: | 15d. | \$ | |
| Specify: 16. \$ 0.00 Installment or lease payments: 17a. Car payments for Vehicle 1 17a. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17b. Car payments for Vehicle 2 17b. \$ 0.00 17c. Other. Specify: Student Loan 17c. \$ 70.00 17d. Other. Specify: Student Loan 17c. \$ 0.00 17d. Other. Specify: Student Loan 17c. \$ 0.00 17d. Other. Specify: Maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18. \$ 0.00 18 \$ 0.00 19 Other payments you make to support others who do not live with you. \$ 0.00 19 Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20c. Homeowner's association or condominium dues 20e. \$ 0.00 20ther: Specify: 21 + \$ 0.00 21 | | | | <u> </u> | 0.00 |
| Installment or lease payments: 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. S 0.00 17c. Other. Specify: Student Loan 17c. S 17c. S 17c. Other. Specify: Student Loan 17d. Other. Specify: Student Loan 17d. Other. Specify: Student Loan 17d. Other. Specify: 17d. S 0.00 17d. Other. Specify: Student Loan 17d. S 0.00 17d. Other. Specify: 17d. S 0.00 17d. Other. Specify: 17d. S 0.00 17d. Other spayments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). 18. S 0.00 18. S 0.00 19. Other payments you make to support others who do not live with you. 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. S 0.00 20b. Real estate taxes 20b. S 0.00 20c. Property, homeowner's, or renter's insurance 20c. S 0.00 20d. Maintenance, repair, and upkeep expenses 20d. S 20d. S 0.00 20e. Homeowner's association or condominium dues 20e. S 0.00 20b. Homeowner's association or condominium dues 20e. S 0.00 20c. Property: 21. +S 0.00 21b. S 22c. Subtract your monthly expenses. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? 23c. Subtract your monthly net income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? 23c. Subtract your monthly net income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? 23c. Subtract your monthly expenses from your expenses within the year after you file this form? 23c. Subtract your monthly expenses from your expenses within the year after you file this form? 23c. Subtract your monthly expenses from your expenses within the year after you file this form? | | | 16. | \$ | 0.00 |
| 17a. Car payments for Vehicle 1 17b. Car payments for Vehicle 2 17b. Car payments for Vehicle 2 17c. Other. Specify: Student Loan 17d. Other. Specify: Student Loan 17d. Other. Specify: 17d. \$ 0.00 17d. Other symmets of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). \$ 0.00 17d. Other payments you make to support others who do not live with you. \$ 0.00 18e. Specify: 19d. \$ 0.00 19d. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 20e. Your monthly expenses. Add lines 4 through 21. 22. \$ 2,481.00 21d. Subtract your monthly expenses. Calculate your monthly expenses. 23b. \$ 2,481.00 23b. Copy your monthly expenses from line 22 above. 23b. \$ 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? 24c. Subtract your monthly net income. \$ 25c. Subtract your monthly expenses from your expenses within the year after you file this form? 25c. Subtract your monthly net income. \$ 25c. Subtract your monthly expenses from your expenses within the year after you file this form? 25c. Subtract your monthly expenses from your expenses within the year after you file this form? 25c. Subtract your monthly expenses of decrease because of the pay in the your monthly expenses of decrease because of the pay in the your monthly expenses of the your monthly expenses of decrease because of the pay in the your month | . Instal | Ilment or lease payments: | | · . | |
| 17c. Other. Specify: Student Loan | | | 17a. | \$ | 0.00 |
| 17c. Other. Specify: Student Loan | 17b. | Car payments for Vehicle 2 | 17b. | \$ | 0.00 |
| 17d. Other. Specify: 17d. \$ 0.00 | 17c. | Other. Specify: Student Loan | 17c. | \$ | |
| Your payments of alimony, maintenance, and support that you did not report as deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Specify: Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. \$ 0.00 Nortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 20her: Specify: 21. +\$ 0.00 21. +\$ 0.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,560.00 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly net income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ -921.00 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. | | | 17d. | \$ | |
| deducted from your pay on line 5, Schedule I, Your Income (Official Form 6I). Other payments you make to support others who do not live with you. Specify: Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20e. # 0.00 Other: Specify: 21. +\$ 0.00 Other: Specify: Your monthly expenses. Add lines 4 through 21. The result is your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,560.00 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly net income. 23d. Subtract your monthly net income. 23d. Subtract your monthly net income. 23d. \$ -921.00 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. | | · · · · · · · · · · · · · · · · · · · | as | | |
| Other payments you make to support others who do not live with you. Specify: 19. Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 20ther: Specify: 21. +\$ 0.00 21. +\$ 0.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly net income. 23d. Copy you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. | | | | \$ | 0.00 |
| Other real property expenses not included in lines 4 or 5 of this form or on Schedule I: Your Income. 20a. Mortgages on other property 20a. \$ 0.00 20b. Real estate taxes 20b. \$ 0.00 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20e. Homeowner's association or condominium dues 20e. \$ 0.00 20fther: Specify: 21. +\$ 0.00 21. +\$ 0.00 22. \$ 2,481.00 23. Copy line 12 (your combined monthly income) from Schedule I. 23a. Copy your monthly expenses from line 22 above. 23b. Copy your monthly expenses from your monthly income. 25c. Subtract your monthly expenses from your monthly income. 25c. The result is your monthly net income. 25c. Subtract your monthly expenses from your monthly income. 25c. The result is your monthly net income. 25c. Subtract your monthly expenses from your monthly income. 25c. The result is your monthly net income. 25c. Subtract your monthly expenses from your expenses within the year after you file this form? 25c. Subtract you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. | | | | \$ | 0.00 |
| 20a. Mortgages on other property 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. Maintenance, repair, and upkeep expenses 20d. Homeowner's association or condominium dues 20e. Homeowner's association or condominium dues 20e. \$ 0.00 20ther: Specify: 21. +\$ 0.00 21. +\$ 0.00 22. \$ 2,481.00 23. Capy line 12 (your combined monthly income) from Schedule I. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. 23c. Subtract your monthly net income. 23c. Subtract your monthly net income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? 23c. For example, do you expect an increase or decrease in your expenses within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. 25c. Yes. | | | | | |
| 20b. Real estate taxes 20c. Property, homeowner's, or renter's insurance 20c. Property, homeowner's, or renter's insurance 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 20fter: Specify: 21. +\$ 0.00 22. \$ 2,481.00 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,560.00 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. 25c. Yes. | | | | | |
| 20c. Property, homeowner's, or renter's insurance 20c. \$ 0.00 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 Cher: Specify: 21. +\$ 0.00 Cher: Specify: 21. +\$ 0.00 Your monthly expenses. Add lines 4 through 21. 22. \$ 2,481.00 The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,560.00 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | 20a. | Mortgages on other property | | | 0.00 |
| 20d. Maintenance, repair, and upkeep expenses 20d. \$ 0.00 20e. Homeowner's association or condominium dues 20e. \$ 0.00 Other: Specify: 21. +\$ 0.00 Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly expenses from your monthly income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ -921.00 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | 20b. | Real estate taxes | 20b. | \$ | 0.00 |
| 20e. Homeowner's association or condominium dues 20e. \$ 0.00 Other: Specify: 21. +\$ 0.00 Your monthly expenses. Add lines 4 through 21. 22. \$ 2,481.00 The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,560.00 23b. Copy your monthly expenses from line 22 above. 23b\$ 2,481.00 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ -921.00 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | 20c. | Property, homeowner's, or renter's insurance | 20c. | \$ | 0.00 |
| Other: Specify: 21. +\$ 0.00 Your monthly expenses. Add lines 4 through 21. 22. \$ 2,481.00 The result is your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,560.00 23b. Copy your monthly expenses from line 22 above. 23b\$ 2,481.00 23c. Subtract your monthly expenses from your monthly income. | 20d. | Maintenance, repair, and upkeep expenses | 20d. | \$ | 0.00 |
| Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | 20e. | Homeowner's association or condominium dues | 20e. | \$ | 0.00 |
| Your monthly expenses. Add lines 4 through 21. The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | Other | : Specify: | 21. | +\$ | 0.00 |
| The result is your monthly expenses. Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly net income. The result is your monthly net income. 23c. \$ | | - | | ¢ | 0 404 00 |
| Calculate your monthly net income. 23a. Copy line 12 (your combined monthly income) from Schedule I. 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ | | • • | 22. | Φ | 2,481.00 |
| 23a. Copy line 12 (your combined monthly income) from Schedule I. 23a. \$ 1,560.00 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$ -921.00 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because or modification to the terms of your mortgage? No. Yes. | | | | | |
| 23b. Copy your monthly expenses from line 22 above. 23c. Subtract your monthly expenses from your monthly income. The result is your monthly net income. 23c. \$\frac{921.00}{\$}\$ Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | | • | 232 | \$ | 1 560 00 |
| 23c. Subtract your monthly expenses from your monthly income. The result is your <i>monthly net income</i> . 23c. \$ -921.00 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | | | | | |
| The result is your <i>monthly net income</i> . 23c. \$ -921.00 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | ∠3D. | Copy your monthly expenses from line 22 above. | ∠30. | -φ | 2,481.00 |
| The result is your <i>monthly net income</i> . 23c. \$ -921.00 Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | 220 | Subtract your monthly expanded from your monthly income | | | |
| Do you expect an increase or decrease in your expenses within the year after you file this form? For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | | | 23c. | \$ | -921.00 |
| For example, do you expect to finish paying for your car loan within the year or do you expect your mortgage payment to increase or decrease because of modification to the terms of your mortgage? No. Yes. | | The result to your monuny net moonto. | | 1 | |
| ☐ Yes. | For exa | ample, do you expect to finish paying for your car loan within the year or do you expect | | | se or decrease because o |
| | ■ No |). | | | |
| | ☐ Ye | es. | | | |
| Explain: | | | | | |

Document

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Page 27 of 50

B6 Declaration (Official Form 6 - Declaration). (12/07)

United States Bankruptcy Court Northern District of Illinois

| In re | Carmen Gonzalez | | | Case No. | | | | |
|-------|--|-----------|--|-----------|------|--|--|--|
| | | | Debtor(s) | Chapter | 7 | | | |
| | | | | | | | | |
| | DECLARATION CONCERNING DEBTOR'S SCHEDULES | | | | | | | |
| | DECLARATION UNDER I | PENALTY (| OF PERJURY BY INDIV | IDUAL DEF | BTOR | | | |
| | I declare under penalty of perjury that I have read the foregoing summary and schedules, consisting of | | | | | | | |
| Date | March 18, 2015 | Signature | /s/ Carmen Gonzalez Carmen Gonzalez Debtor | | | | | |

Penalty for making a false statement or concealing property: Fine of up to \$500,000 or imprisonment for up to 5 years or both. 18 U.S.C. §§ 152 and 3571.

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 28 of 50

B7 (Official Form 7) (04/13)

United States Bankruptcy Court Northern District of Illinois

| In re | Carmen Gonzalez | | Case No. | |
|-------|-----------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

STATEMENT OF FINANCIAL AFFAIRS

This statement is to be completed by every debtor. Spouses filing a joint petition may file a single statement on which the information for both spouses is combined. If the case is filed under chapter 12 or chapter 13, a married debtor must furnish information for both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed. An individual debtor engaged in business as a sole proprietor, partner, family farmer, or self-employed professional, should provide the information requested on this statement concerning all such activities as well as the individual's personal affairs. To indicate payments, transfers and the like to minor children, state the child's initials and the name and address of the child's parent or guardian, such as "A.B., a minor child, by John Doe, guardian." Do not disclose the child's name. See, 11 U.S.C. § 112; Fed. R. Bankr. P. 1007(m).

Questions 1 - 18 are to be completed by all debtors. Debtors that are or have been in business, as defined below, also must complete Questions 19 - 25. **If the answer to an applicable question is "None," mark the box labeled "None."** If additional space is needed for the answer to any question, use and attach a separate sheet properly identified with the case name, case number (if known), and the number of the question.

DEFINITIONS

"In business." A debtor is "in business" for the purpose of this form if the debtor is a corporation or partnership. An individual debtor is "in business" for the purpose of this form if the debtor is or has been, within six years immediately preceding the filing of this bankruptcy case, any of the following: an officer, director, managing executive, or owner of 5 percent or more of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership; a sole proprietor or self-employed full-time or part-time. An individual debtor also may be "in business" for the purpose of this form if the debtor engages in a trade, business, or other activity, other than as an employee, to supplement income from the debtor's primary employment.

"Insider." The term "insider" includes but is not limited to: relatives of the debtor; general partners of the debtor and their relatives; corporations of which the debtor is an officer, director, or person in control; officers, directors, and any persons in control of a corporate debtor and their relatives; affiliates of the debtor and insiders of such affiliates; and any managing agent of the debtor. 11 U.S.C. § 101(2), (31).

1. Income from employment or operation of business

None

State the gross amount of income the debtor has received from employment, trade, or profession, or from operation of the debtor's business, including part-time activities either as an employee or in independent trade or business, from the beginning of this calendar year to the date this case was commenced. State also the gross amounts received during the **two years** immediately preceding this calendar year. (A debtor that maintains, or has maintained, financial records on the basis of a fiscal rather than a calendar year may report fiscal year income. Identify the beginning and ending dates of the debtor's fiscal year.) If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income of both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

| AMOUNT | SOURCI | | | |
|-------------|--------|--|--|--|
| \$4,003.00 | 2015 | | | |
| \$23,419.00 | 2014 | | | |
| \$17,451.00 | 2013 | | | |

2. Income other than from employment or operation of business

None

State the amount of income received by the debtor other than from employment, trade, profession, or operation of the debtor's business during the **two years** immediately preceding the commencement of this case. Give particulars. If a joint petition is filed, state income for each spouse separately. (Married debtors filing under chapter 12 or chapter 13 must state income for each spouse whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

AMOUNT SOURCE

B7 (Official Form 7) (04/13)

2

3. Payments to creditors

None

Complete a. or b., as appropriate, and c.

a. *Individual or joint debtor(s) with primarily consumer debts:* List all payments on loans, installment purchases of goods or services, and other debts to any creditor made within **90 days** immediately preceding the commencement of this case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$600. Indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS DATES OF AMOUNT STILL PAYMENTS AMOUNT PAID OWING

None

b. Debtor whose debts are not primarily consumer debts: List each payment or other transfer to any creditor made within **90 days** immediately preceding the commencement of the case unless the aggregate value of all property that constitutes or is affected by such transfer is less than \$6,225*. If the debtor is an individual, indicate with an asterisk (*) any payments that were made to a creditor on account of a domestic support obligation or as part of an alternative repayment schedule under a plan by an approved nonprofit budgeting and credit counseling agency. (Married debtors filing under chapter 12 or chapter 13 must include payments and other transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DATES OF PAID OR
PAYMENTS/ VALUE OF AMOUNT STILL
NAME AND ADDRESS OF CREDITOR TRANSFERS TRANSFERS OWING

None

c. *All debtors:* List all payments made within **one year** immediately preceding the commencement of this case to or for the benefit of creditors who are or were insiders. (Married debtors filing under chapter 12 or chapter 13 must include payments by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR AND RELATIONSHIP TO DEBTOR

DATE OF PAYMENT

AMOUNT PAID

AMOUNT STILL OWING

4. Suits and administrative proceedings, executions, garnishments and attachments

None

11 sc 4000

a. List all suits and administrative proceedings to which the debtor is or was a party within **one year** immediately preceding the filing of this bankruptcy case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

CAPTION OF SUIT NATURE OF COURT OR AGENCY STATUS OR DISPOSITION AND CASE NUMBER **PROCEEDING** AND LOCATION Asset Acceptance, LLC Judgment/Collec Circuit Court of lake County The **Pending Ninteenth Judicial Circuit Lake County** Carmen M. Gonzalez Illinois 13 AR 372 Chrysler Financial (TD Auto Finance, LLC Lake County, IL **Pendinf** Colection Carmen Gonzalez 10 sc 9341 Capital One Collection Lake County, IL **Pending Carmen Gonzalez** 10 sc 8993 Portfolio Recovery Associates, Collection Lake County, IL **Pending Carmen Gonzalez**

^{*} Amount subject to adjustment on 4/01/16, and every three years thereafter with respect to cases commenced on or after the date of adjustment.

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 30 of 50

B7 (Official Form 7) (04/13)

3

b. Describe all property that has been attached, garnished or seized under any legal or equitable process within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not

filed.)

NAME AND ADDRESS OF PERSON FOR WHOSE BENEFIT PROPERTY WAS SEIZED

DATE OF SEIZURE

DESCRIPTION AND VALUE OF PROPERTY

5. Repossessions, foreclosures and returns

None

List all property that has been repossessed by a creditor, sold at a foreclosure sale, transferred through a deed in lieu of foreclosure or returned to the seller, within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR OR SELLER DATE OF REPOSSESSION, FORECLOSURE SALE, TRANSFER OR RETURN

DESCRIPTION AND VALUE OF PROPERTY

6. Assignments and receiverships

None

a. Describe any assignment of property for the benefit of creditors made within **120 days** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include any assignment by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF ASSIGNEE

DATE OF ASSIGNMENT

TERMS OF ASSIGNMENT OR SETTLEMENT

None b. List all property which has been in the hands of a custodian, receiver, or court-appointed official within **one year** immediately

preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning property of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CUSTODIAN NAME AND LOCATION OF COURT CASE TITLE & NUMBER

DATE OF ORDER DESCRIPTION AND VALUE OF PROPERTY

7. Gifts

None

List all gifts or charitable contributions made within **one year** immediately preceding the commencement of this case except ordinary and usual gifts to family members aggregating less than \$200 in value per individual family member and charitable contributions aggregating less than \$100 per recipient. (Married debtors filing under chapter 12 or chapter 13 must include gifts or contributions by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF PERSON OR ORGANIZATION RELATIONSHIP TO DEBTOR. IF ANY

DATE OF GIFT

DESCRIPTION AND VALUE OF GIFT

8. Losses

None

List all losses from fire, theft, other casualty or gambling within **one year** immediately preceding the commencement of this case **or since the commencement of this case.** (Married debtors filing under chapter 12 or chapter 13 must include losses by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

DESCRIPTION AND VALUE OF PROPERTY DESCRIPTION OF CIRCUMSTANCES AND, IF LOSS WAS COVERED IN WHOLE OR IN PART BY INSURANCE, GIVE PARTICULARS

DATE OF LOSS

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 31 of 50

B7 (Official Form 7) (04/13)

4

9. Payments related to debt counseling or bankruptcy

None

List all payments made or property transferred by or on behalf of the debtor to any persons, including attorneys, for consultation concerning debt consolidation, relief under the bankruptcy law or preparation of the petition in bankruptcy within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS OF PAYEE

David M. Siegel & Associates 790 Chaddick Drive Wheeling, IL 60090 DATE OF PAYMENT, NAME OF PAYER IF OTHER THAN DEBTOR 2/27/15 AMOUNT OF MONEY
OR DESCRIPTION AND VALUE
OF PROPERTY

\$1,515.00

10. Other transfers

None

a. List all other property, other than property transferred in the ordinary course of the business or financial affairs of the debtor, transferred either absolutely or as security within **two years** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include transfers by either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF TRANSFEREE, RELATIONSHIP TO DEBTOR

DATE

DESCRIBE PROPERTY TRANSFERRED AND VALUE RECEIVED

None b. List all property transferred by the debtor within **ten years** immediately preceding the commencement of this case to a self-settled trust or similar device of which the debtor is a beneficiary.

NAME OF TRUST OR OTHER

DEVICE

DATE(S) OF TRANSFER(S) AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY OR DEBTOR'S INTEREST IN PROPERTY

11. Closed financial accounts

None

List all financial accounts and instruments held in the name of the debtor or for the benefit of the debtor which were closed, sold, or otherwise transferred within **one year** immediately preceding the commencement of this case. Include checking, savings, or other financial accounts, certificates of deposit, or other instruments; shares and share accounts held in banks, credit unions, pension funds, cooperatives, associations, brokerage houses and other financial institutions. (Married debtors filing under chapter 12 or chapter 13 must include information concerning accounts or instruments held by or for either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF INSTITUTION

TYPE OF ACCOUNT, LAST FOUR DIGITS OF ACCOUNT NUMBER, AND AMOUNT OF FINAL BALANCE

AMOUNT AND DATE OF SALE OR CLOSING

12. Safe deposit boxes

None

List each safe deposit or other box or depository in which the debtor has or had securities, cash, or other valuables within **one year** immediately preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include boxes or depositories of either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF BANK OR OTHER DEPOSITORY

NAMES AND ADDRESSES OF THOSE WITH ACCESS TO BOX OR DEPOSITORY

DESCRIPTION OF CONTENTS

DATE OF TRANSFER OR SURRENDER, IF ANY

13. Setoffs

None

List all setoffs made by any creditor, including a bank, against a debt or deposit of the debtor within **90 days** preceding the commencement of this case. (Married debtors filing under chapter 12 or chapter 13 must include information concerning either or both spouses whether or not a joint petition is filed, unless the spouses are separated and a joint petition is not filed.)

NAME AND ADDRESS OF CREDITOR

DATE OF SETOFF

AMOUNT OF SETOFF

Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Case 15-09568 Doc 1 Filed 03/18/15 Document Page 32 of 50

B7 (Official Form 7) (04/13)

14. Property held for another person

None List all property owned by another person that the debtor holds or controls.

NAME AND ADDRESS OF OWNER DESCRIPTION AND VALUE OF PROPERTY LOCATION OF PROPERTY

15. Prior address of debtor

None

If the debtor has moved within **three years** immediately preceding the commencement of this case, list all premises which the debtor occupied during that period and vacated prior to the commencement of this case. If a joint petition is filed, report also any separate address of either spouse.

DATES OF OCCUPANCY NAME USED **ADDRESS**

16. Spouses and Former Spouses

None

If the debtor resides or resided in a community property state, commonwealth, or territory (including Alaska, Arizona, California, Idaho, Louisiana, Nevada, New Mexico, Puerto Rico, Texas, Washington, or Wisconsin) within eight years immediately preceding the commencement of the case, identify the name of the debtor's spouse and of any former spouse who resides or resided with the debtor in the community property state.

NAME

17. Environmental Information.

For the purpose of this question, the following definitions apply:

"Environmental Law" means any federal, state, or local statute or regulation regulating pollution, contamination, releases of hazardous or toxic substances, wastes or material into the air, land, soil, surface water, groundwater, or other medium, including, but not limited to, statutes or regulations regulating the cleanup of these substances, wastes, or material.

"Site" means any location, facility, or property as defined under any Environmental Law, whether or not presently or formerly owned or operated by the debtor, including, but not limited to, disposal sites.

"Hazardous Material" means anything defined as a hazardous waste, hazardous substance, toxic substance, hazardous material, pollutant, or contaminant or similar term under an Environmental Law

None

a. List the name and address of every site for which the debtor has received notice in writing by a governmental unit that it may be liable or potentially liable under or in violation of an Environmental Law. Indicate the governmental unit, the date of the notice, and, if known, the Environmental Law:

NAME AND ADDRESS OF DATE OF **ENVIRONMENTAL** SITE NAME AND ADDRESS NOTICE LAW

GOVERNMENTAL UNIT

b. List the name and address of every site for which the debtor provided notice to a governmental unit of a release of Hazardous None

Material. Indicate the governmental unit to which the notice was sent and the date of the notice.

DATE OF NAME AND ADDRESS OF **ENVIRONMENTAL**

SITE NAME AND ADDRESS GOVERNMENTAL UNIT NOTICE LAW

None c. List all judicial or administrative proceedings, including settlements or orders, under any Environmental Law with respect to which the debtor is or was a party. Indicate the name and address of the governmental unit that is or was a party to the proceeding, and the

docket number.

NAME AND ADDRESS OF GOVERNMENTAL UNIT

DOCKET NUMBER

STATUS OR DISPOSITION

B7 (Official Form 7) (04/13)

6

18. Nature, location and name of business

None

a. *If the debtor is an individual*, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was an officer, director, partner, or managing executive of a corporation, partner in a partnership, sole proprietor, or was self-employed in a trade, profession, or other activity either full- or part-time within **six years** immediately preceding the commencement of this case, or in which the debtor owned 5 percent or more of the voting or equity securities within **six years** immediately preceding the commencement of this case.

If the debtor is a partnership, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities, within six years immediately preceding the commencement of this case.

If the debtor is a corporation, list the names, addresses, taxpayer identification numbers, nature of the businesses, and beginning and ending dates of all businesses in which the debtor was a partner or owned 5 percent or more of the voting or equity securities within six vears immediately preceding the commencement of this case.

LAST FOUR DIGITS OF SOCIAL-SECURITY OR OTHER INDIVIDUAL TAXPAYER-I.D. NO. (ITIN)/ COMPLETE EIN ADDRESS

BEGINNING AND NATURE OF BUSINESS ENDING DATES

None

NAME

b. Identify any business listed in response to subdivision a., above, that is "single asset real estate" as defined in 11 U.S.C. § 101.

NAME ADDRESS

The following questions are to be completed by every debtor that is a corporation or partnership and by any individual debtor who is or has been, within **six years** immediately preceding the commencement of this case, any of the following: an officer, director, managing executive, or owner of more than 5 percent of the voting or equity securities of a corporation; a partner, other than a limited partner, of a partnership, a sole proprietor, or self-employed in a trade, profession, or other activity, either full- or part-time.

(An individual or joint debtor should complete this portion of the statement **only** if the debtor is or has been in business, as defined above, within six years immediately preceding the commencement of this case. A debtor who has not been in business within those six years should go directly to the signature page.)

19. Books, records and financial statements

None

a. List all bookkeepers and accountants who within **two years** immediately preceding the filing of this bankruptcy case kept or supervised the keeping of books of account and records of the debtor.

NAME AND ADDRESS

DATES SERVICES RENDERED

None b. List all firms or individuals who within the **two years** immediately preceding the filing of this bankruptcy case have audited the books of account and records, or prepared a financial statement of the debtor.

NAME ADDRESS

DATES SERVICES RENDERED

None c. List all firms or individuals who at the time of the commencement of this case were in possession of the books of account and records of the debtor. If any of the books of account and records are not available, explain.

NAME ADDRESS

None d. List all financial institutions, creditors and other parties, including mercantile and trade agencies, to whom a financial statement was issued by the debtor within **two years** immediately preceding the commencement of this case.

NAME AND ADDRESS DATE ISSUED

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 34 of 50

B7 (Official Form 7) (04/13)

7

20. Inventories

None

a. List the dates of the last two inventories taken of your property, the name of the person who supervised the taking of each inventory, and the dollar amount and basis of each inventory.

DATE OF INVENTORY

INVENTORY SUPERVISOR

DOLLAR AMOUNT OF INVENTORY

(Specify cost, market or other basis)

NI---- 1 T : 4 d

b. List the name and address of the person having possession of the records of each of the inventories reported in a., above.

DATE OF INVENTORY

NAME AND ADDRESSES OF CUSTODIAN OF INVENTORY RECORDS

21. Current Partners, Officers, Directors and Shareholders

None

a. If the debtor is a partnership, list the nature and percentage of partnership interest of each member of the partnership.

NAME AND ADDRESS

NATURE OF INTEREST

PERCENTAGE OF INTEREST

None b. If the debtor is a corporation, list all officers and directors of the corporation, and each stockholder who directly or indirectly owns, controls, or holds 5 percent or more of the voting or equity securities of the corporation.

NAME AND ADDRESS

TITLE

NATURE AND PERCENTAGE OF STOCK OWNERSHIP

22. Former partners, officers, directors and shareholders

None

a. If the debtor is a partnership, list each member who withdrew from the partnership within **one year** immediately preceding the commencement of this case.

NAME

ADDRESS

DATE OF WITHDRAWAL

None b. If the debtor is a corporation, list all officers, or directors whose relationship with the corporation terminated within **one year** immediately preceding the commencement of this case.

NAME AND ADDRESS

TITLE

DATE OF TERMINATION

23. Withdrawals from a partnership or distributions by a corporation

None

If the debtor is a partnership or corporation, list all withdrawals or distributions credited or given to an insider, including compensation in any form, bonuses, loans, stock redemptions, options exercised and any other perquisite during **one year** immediately preceding the commencement of this case.

NAME & ADDRESS OF RECIPIENT, RELATIONSHIP TO DEBTOR

DATE AND PURPOSE OF WITHDRAWAL

AMOUNT OF MONEY OR DESCRIPTION AND VALUE OF PROPERTY

24. Tax Consolidation Group.

None

If the debtor is a corporation, list the name and federal taxpayer identification number of the parent corporation of any consolidated group for tax purposes of which the debtor has been a member at any time within **six years** immediately preceding the commencement of the case.

NAME OF PARENT CORPORATION

TAXPAYER IDENTIFICATION NUMBER (EIN)

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 35 of 50

B7 (Official Form 7) (04/13)

8

25. Pension Funds.

None

If the debtor is not an individual, list the name and federal taxpayer-identification number of any pension fund to which the debtor, as an employer, has been responsible for contributing at any time within **six years** immediately preceding the commencement of the case.

NAME OF PENSION FUND

TAXPAYER IDENTIFICATION NUMBER (EIN)

* * * * * *

DECLARATION UNDER PENALTY OF PERJURY BY INDIVIDUAL DEBTOR

I declare under penalty of perjury that I have read the answers contained in the foregoing statement of financial affairs and any attachments thereto and that they are true and correct.

Date March 18, 2015 Signature //s/ Carmen Gonzalez
Carmen Gonzalez
Debtor

Penalty for making a false statement: Fine of up to \$500,000 or imprisonment for up to 5 years, or both. 18 U.S.C. §§ 152 and 3571

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 36 of 50

B8 (Form 8) (12/08)

United States Bankruptcy Court Northern District of Illinois

| In re | Carmen Gonzalez | | Case No. | |
|-------|-----------------|-----------|----------|---|
| | | Debtor(s) | Chapter | 7 |

CHAPTER 7 INDIVIDUAL DEBTOR'S STATEMENT OF INTENTION

| property of the estate. Attach additional pages if necessarily | • • |
|--|--|
| Property No. 1 | |
| Creditor's Name: Chase Mortgage | Describe Property Securing Debt: Single Family Home 20666 N. Margaret Ave. Lincolnshire, IL 60069 |
| Property will be (check one): | |
| ☐ Surrendered ■ Retained | |
| If retaining the property, I intend to (check at least one): ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain _ Debtor will retain collateral and continuus. S.C. § 522(f)). | ue to make regular payments. (for example, avoid lien using 11 |
| Property is (check one): | |
| ■ Claimed as Exempt | ☐ Not claimed as exempt |
| Property No. 2 |] |
| Creditor's Name: Ocwen Loan Servicing, LLC | Describe Property Securing Debt: Single Family Home 20666 N. Margaret Ave. Lincolnshire, IL 60069 |
| Property will be (check one): | |
| ☐ Surrendered ■ Retained | |
| If retaining the property, I intend to (check at least one): ☐ Redeem the property ☐ Reaffirm the debt ☐ Other. Explain ☐ Debtor will retain collateral and continuous. Section (Continuous). | ue to make regular payments. (for example, avoid lien using 11 |
| Property is (check one): | |
| ■ Claimed as Exempt | ☐ Not claimed as exempt |

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 37 of 50

Page 2

PART B - Personal property subject to unexpired leases. (All three columns of Part B must be completed for each unexpired lease. Attach additional pages if necessary.)

| Date March 18, 2015 | ed lease. Signature | /s/ Carmen Gonzalez | | |
|--|----------------------|---------------------|--|--|
| Lessor's Name: -NONE- declare under penalty of perjury that | Describe Leased P | | Lease will be Assumed pursuant to 11 U.S.C. § 365(p)(2): YES NO | |
| Property No. 1 | | | 1 | |

Debtor

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 38 of 50

United States Bankruptcy Court Northern District of Illinois

| | 1101 | them District of Innions | | |
|-------|--|--|--|------------------------------------|
| In re | Carmen Gonzalez | Debtor(s) | Case No. Chapter | 7 |
| | | Debtot(s) | Chapter | |
| | DISCLOSURE OF COMPE | NSATION OF ATTO | RNEY FOR DI | EBTOR(S) |
|] | Pursuant to 11 U.S.C. § 329(a) and Bankruptcy Rule 20 paid to me within one year before the filing of the petition behalf of the debtor(s) in contemplation of or in connect | on in bankruptcy, or agreed to b | e paid to me, for serv | |
| | For legal services, I have agreed to accept | | \$ | 1,515.00 |
| | Prior to the filing of this statement I have received. | | | 1,515.00 |
| | Balance Due | | | 0.00 |
| 2. | The source of the compensation paid to me was: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 3. | The source of compensation to be paid to me is: | | | |
| | ■ Debtor □ Other (specify): | | | |
| 4. | ■ I have not agreed to share the above-disclosed comp | pensation with any other person | unless they are mem | bers and associates of my law firm |
| | ☐ I have agreed to share the above-disclosed compens copy of the agreement, together with a list of the national copy of the agreement. | | | |
| 5. | In return for the above-disclosed fee, I have agreed to re | ender legal service for all aspect | s of the bankruptcy of | ease, including: |
| 1 | a. Analysis of the debtor's financial situation, and rendebto. Preparation and filing of any petition, schedules, state. Representation of the debtor at the meeting of credited. [Other provisions as needed] Negotiations with secured creditors to agreements and applications as needed avoidance of liens on household goods | ement of affairs and plan which ors and confirmation hearing, ar reduce to market value; exe I; preparation and filing of a | n may be required; and any adjourned hea emption planning; | rings thereof; |
| 6. | By agreement with the debtor(s), the above-disclosed fe Representation of the debtors in any dis cases), or any other adversary proceeding | schargeability actions, judi | | es (except in Chapter 13 |
| | | CERTIFICATION | | |
| | I certify that the foregoing is a complete statement of an pankruptcy proceeding. | y agreement or arrangement for | payment to me for r | epresentation of the debtor(s) in |
| Dated | i: March 18, 2015 | /s/ David M. Siege | el | |
| | | David M. Siegel David M. Siegel & 790 Chaddick Dri Wheeling, IL 6009 (847) 520-8100 | ve | |

Chapter 7 Bankruptcy Retainer Agreement

This agreement acknowledges that the undersigned individual(s) [Client(s)] hereby retains and employs the Law Firm of DAVID M. SIEGEL & ASSOCIATES [Attorney] for representation in a Chapter 7 bankruptcy case. In consideration for services rendered and to be rendered, the Client agrees to pay Attorney as follows:

- a) A FLAT FEE as specified in paragraph H will be required to file a bankruptcy petition for the Client and for representation of the Client through discharge. The fee includes all required court costs and filing fees, as well as compensation for Attorney's time and labor. The fee is immediate compensation for the firm's commitment to perform future services; the fee is property of the firm and may be deposited in the firm's operating or business account.
- b) Representation shall begin upon execution of this agreement and tender of the initial payment, and will continue until the end of the case. The fee includes the preparation, review, and revision of the bankruptcy petition, communications with the Client, representation and appearance at the §341 Meeting of Creditors and §2004 examinations as necessary, communication with the bankruptcy and United States trustees, communication with creditors, review and completion of reaffirmation agreements, and court appearances.
- c) The fee **does not** include representation in any adversarial proceedings. The Client and Attorney may enter in to an additional agreement to provide for representation in an adversarial proceeding. In the event that the case is converted to another Chapter, there may be an additional fee.
- d) Additional Fees:
 - A fee of \$250.00 shall be added in the event that Client misses the scheduled §341 Meeting of Creditors.
 - A fee of \$100.00 shall be added to amend Schedules D, E, and F to include creditors who were not originally provided by the Client. The Client has the full responsibility to ensure that all creditors are listed.
 - A fee of \$25.00 shall be added for any non-sufficient/returned checks. Post-dated checks are not accepted and will be voided upon receipt.
 - A fee of \$820.00 shall be added to reopen a case and file the second credit counseling certificate if the Client fails to take the second credit counseling course and provide Attorney with the certificate in a timely fashion.
- e) The Client will be billed on any outstanding balance at the rate of \$100.00 every two weeks. Clients who fail to make payments as required will be assessed late fees in the amount of \$25.00 per billing period plus interest at the rate of 18% per year on any unpaid balance.
- f) No case shall be filed until all fees are paid in full.
- g) In the event that a Client pays the flat fee in full, and later elects to not proceed with the case, the Client is entitled to a refund of the court costs and filing fees only.

Important Bankruptcy Information

Debts that are Discharged

The Chapter 7 discharge order eliminates a Client's legal obligation to pay a debt that is discharged. Most, but not all, types of debts are discharged if the debt existed on the date the bankruptcy case was filed. (If this case was begun under a different Chapter of the Bankruptcy Code and converted to a Chapter 7, the discharge applies to debts owed when the bankruptcy case was converted.)

Debts that are Not Discharged

Some of the common types of debts which are not discharged in a Chapter 7 bankruptcy case are:

- a) Debts for most taxes;
- b) Debts that are in the nature of alimony, maintenance, or support;
- c) Debts for student loans;

Η.

- d) Debts for most fines, penalties, forfeitures, or criminal restitution obligations;
- e) Debts for personal injuries or death caused by the Client's operation of a motor vehicle while intoxicated;
- f) Some debts that are not properly listed by the Client;
- g) Debts that the bankruptcy court specifically determines to be non-dischargeable;
- h) Debts for which the Client has given up the discharge protection by signing reaffirmation agreements in compliance with the Bankruptcy Code requirements for reaffirming debts.

The FLAT FEE for representation in this matter will be \$ \(\lambda \) \(\lambda \)

Client acknowledge that he or she has read this agreement in its entirety, understands it fully, has had an

| opportunity to ask questions reg | arding this agreement, is satisfied with it, and accepts it in its entirety. | |
|----------------------------------|--|---|
| Date: 2/27/15 | Signed: Carwer Cos | |
| , , | Print: Corner Gonzalez | |
| | | |
| Date: | Signed: | |
| | Print: | • |
| | | |
| Date: 2/27/15 | Signed: | |

Attorney for David M. Siegel

UNITED STATES BANKRUPTCY COURT NORTHERN DISTRICT OF ILLINOIS

NOTICE TO CONSUMER DEBTOR(S) UNDER § 342(b) OF THE BANKRUPTCY CODE

In accordance with § 342(b) of the Bankruptcy Code, this notice to individuals with primarily consumer debts: (1) Describes briefly the services available from credit counseling services; (2) Describes briefly the purposes, benefits and costs of the four types of bankruptcy proceedings you may commence; and (3) Informs you about bankruptcy crimes and notifies you that the Attorney General may examine all information you supply in connection with a bankruptcy case.

You are cautioned that bankruptcy law is complicated and not easily described. Thus, you may wish to seek the advice of an attorney to learn of your rights and responsibilities should you decide to file a petition. Court employees cannot give you legal advice.

Notices from the bankruptcy court are sent to the mailing address you list on your bankruptcy petition. In order to ensure that you receive information about events concerning your case, Bankruptcy Rule 4002 requires that you notify the court of any changes in your address. If you are filing a **joint case** (a single bankruptcy case for two individuals married to each other), and each spouse lists the same mailing address on the bankruptcy petition, you and your spouse will generally receive a single copy of each notice mailed from the bankruptcy court in a jointly-addressed envelope, unless you file a statement with the court requesting that each spouse receive a separate copy of all notices.

1. Services Available from Credit Counseling Agencies

With limited exceptions, § 109(h) of the Bankruptcy Code requires that all individual debtors who file for bankruptcy relief on or after October 17, 2005, receive a briefing that outlines the available opportunities for credit counseling and provides assistance in performing a budget analysis. The briefing must be given within 180 days before the bankruptcy filing. The briefing may be provided individually or in a group (including briefings conducted by telephone or on the Internet) and must be provided by a nonprofit budget and credit counseling agency approved by the United States trustee or bankruptcy administrator. The clerk of the bankruptcy court has a list that you may consult of the approved budget and credit counseling agencies. Each debtor in a joint case must complete the briefing.

In addition, after filing a bankruptcy case, an individual debtor generally must complete a financial management instructional course before he or she can receive a discharge. The clerk also has a list of approved financial management instructional courses. Each debtor in a joint case must complete the course.

2. The Four Chapters of the Bankruptcy Code Available to Individual Consumer Debtors

Chapter 7: Liquidation (\$245 filing fee, \$75 administrative fee, \$15 trustee surcharge: Total Fee \$335)

Chapter 7 is designed for debtors in financial difficulty who do not have the ability to pay their existing debts. Debtors whose debts are primarily consumer debts are subject to a "means test" designed to determine whether the case should be permitted to proceed under chapter 7. If your income is greater than the median income for your state of residence and family size, in some cases, the United States trustee (or bankruptcy administrator), the trustee, or creditors have the right to file a motion requesting that the court dismiss your case under § 707(b) of the Code. It is up to the court to decide whether the case should be dismissed.

Under chapter 7, you may claim certain of your property as exempt under governing law. A trustee may have the right to take possession of and sell the remaining property that is not exempt and use the sale proceeds to pay your creditors.

The purpose of filing a chapter 7 case is to obtain a discharge of your existing debts. If, however, you are found to have committed certain kinds of improper conduct described in the Bankruptcy Code, the court may deny your discharge and, if it does, the purpose for which you filed the bankruptcy petition will be defeated.

Even if you receive a general discharge, some particular debts are not discharged under the law. Therefore, you may still be responsible for most taxes and student loans; debts incurred to pay nondischargeable taxes; domestic support and property settlement obligations; most fines, penalties, forfeitures, and criminal restitution obligations; certain debts which are not properly listed in your bankruptcy papers; and debts for death or personal injury caused by operating a motor vehicle, vessel, or aircraft while intoxicated from alcohol or drugs. Also, if a creditor can prove that a debt arose from fraud, breach of fiduciary duty, or theft, or from a willful and malicious injury, the bankruptcy court may determine that the debt is not discharged.

<u>Chapter 13</u>: Repayment of All or Part of the Debts of an Individual with Regular Income (\$235 filing fee, \$75 administrative fee: Total Fee \$310)

Chapter 13 is designed for individuals with regular income who would like to pay all or part of their debts in installments over a period of time. You are only eligible for chapter 13 if your debts do not exceed certain dollar amounts set forth in the

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 42 of 50

Form B 201A, Notice to Consumer Debtor(s)

Page 2

Bankruptcy Code.

Under chapter 13, you must file with the court a plan to repay your creditors all or part of the money that you owe them, using your future earnings. The period allowed by the court to repay your debts may be three years or five years, depending upon your income and other factors. The court must approve your plan before it can take effect.

After completing the payments under your plan, your debts are generally discharged except for domestic support obligations; most student loans; certain taxes; most criminal fines and restitution obligations; certain debts which are not properly listed in your bankruptcy papers; certain debts for acts that caused death or personal injury; and certain long term secured obligations.

Chapter 11: Reorganization (\$1,167 filing fee, \$550 administrative fee: Total Fee \$1,717)

Chapter 11 is designed for the reorganization of a business but is also available to consumer debtors. Its provisions are quite complicated, and any decision by an individual to file a chapter 11 petition should be reviewed with an attorney.

Chapter 12: Family Farmer or Fisherman (\$200 filing fee, \$75 administrative fee: Total Fee \$275)

Chapter 12 is designed to permit family farmers and fishermen to repay their debts over a period of time from future earnings and is similar to chapter 13. The eligibility requirements are restrictive, limiting its use to those whose income arises primarily from a family-owned farm or commercial fishing operation.

3. Bankruptcy Crimes and Availability of Bankruptcy Papers to Law Enforcement Officials

A person who knowingly and fraudulently conceals assets or makes a false oath or statement under penalty of perjury, either orally or in writing, in connection with a bankruptcy case is subject to a fine, imprisonment, or both. All information supplied by a debtor in connection with a bankruptcy case is subject to examination by the Attorney General acting through the Office of the United States Trustee, the Office of the United States Attorney, and other components and employees of the Department of Justice.

WARNING: Section 521(a)(1) of the Bankruptcy Code requires that you promptly file detailed information regarding your creditors, assets, liabilities, income, expenses and general financial condition. Your bankruptcy case may be dismissed if this information is not filed with the court within the time deadlines set by the Bankruptcy Code, the Bankruptcy Rules, and the local rules of the court. The documents and the deadlines for filing them are listed on Form B200, which is posted at http://www.uscourts.gov/bkforms/bankruptcy_forms.html#procedure.

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 43 of 50

B 201B (Form 201B) (12/09)

United States Bankruptcy Court Northern District of Illinois

| the Bankruptcy |
|----------------|
| h 18, 2015 |
| |
| |
| |
| |

Instructions: Attach a copy of Form B 201 A, Notice to Consumer Debtor(s) Under § 342(b) of the Bankruptcy Code.

Use this form to certify that the debtor has received the notice required by 11 U.S.C. § 342(b) **only** if the certification has **NOT** been made on the Voluntary Petition, Official Form B1. Exhibit B on page 2 of Form B1 contains a certification by the debtor's attorney that the attorney has given the notice to the debtor. The Declarations made by debtors and bankruptcy petition preparers on page 3 of Form B1 also include this certification.

Case 15-09568 Doc 1 Filed 03/18/15 Entered 03/18/15 10:07:43 Desc Main 3/18/15 9:56AM Document Page 44 of 50

United States Bankruptcy CourtNorthern District of Illinois

| | | Not therm District of Hillions | | |
|-------|--|--|------------------------------|----------------|
| In re | Carmen Gonzalez | | Case No. | |
| | | Debtor(s) | Chapter 7 | |
| | VE | RIFICATION OF CREDITOR M | MATRIX | |
| | | Number of | f Creditors: | 52 |
| | The above-named Debtor(s) (our) knowledge. | hereby verifies that the list of credi | itors is true and correct to | the best of my |
| Date: | March 18, 2015 | /s/ Carmen Gonzalez | | |

American Express PO Box 981537 El Paso, TX 79998

American Express Bank FSB c/o Lake Law Magistrate 18 N. County St. Waukegan, IL 60085

AMEX
Bankruptcy Department
PO Box 981535
El Paso, TX 79998-1535

AMEX

Attn: Bankruptcy Department PO Box 297871 Fort Lauderdale, FL 33329

ASPEN 125 Shiller Place Itasca, IL 60143

Asset Acceptance Bankruptcy Department PO Box 2036 Warren, MI 48090

AT&T
Bankruptcy Dept
5407 Andrew Highway
Midland, TX 79706

AT&T U-Verse PO Box 1826 Alpharetta, GA 30023-1826

Beneficial Finance PO Box 3425 Buffalo, NY 14240-9733

Bill Me Later Correspondence PO Box 2394 Omaha, NE 68103-2394 Blitt and Gaines, P.C. Bankrupty Department 661 N. Glenn Ave. Wheeling, IL 60090

Cach LLC 4340 S. Monaco, Second Floor Denver, CO 80237

Cap One Bankruptcy Dept. PO Box 5155 Norcross, GA 30091

Capital 1 Bank Attn: General Correspondence Po Box 30285 Salt Lake City, UT 84130

Capital One Bankruptcy Dept. PO Box 30285 Salt Lake City, UT 84130-0285

Capital One PO Box 6492 Carol Stream, IL 60197

Cavalry PO Box 520 Valhalla, NY 10595

CCS PO Box 88 Bremen, GA 30110

Chase Mortgage PO Box 24696 Columbus, OH 43224

Chasecard
Bankruptcy Department
PO Box 15298
Wilmington, DE 19850

Chrysler 27777 Franklin Rd. Southfield, MI 48034

Chrysler Financial PO Box 551080 Jacksonville, FL 32255

Citi Attn: Bankruptcy Department PO Box 6241

Sioux Falls, SD 57717

Citi PO Box 6500 Sioux Falls, SD 57117-6500

Citibank NA PO Box 769006 San Antonio, TX 78245

Citibank South Dakota N c/o Asset Acceptance PO Box 1630 Warren, MI 48090

Dish Network c/o Stellar Recovery 1327 Highway 2 West Ste. 100 Kalispell, MT 59901

Dish Network Attn: Bankruptcy Dept. P.O. Box 6633 Englewood, CO 80112

Freedman Anselmo Lindberg, LLC 1771 W Diehl Road Suite 150 Naperville, IL 60566

Fulton, Friedman & Gullace, LLP 5 East Van Buren, Ste. 214 Joliet, IL 60432

GE Money Bank Attn: Bankruptcy Dept PO Box 103104 Roswell, GA 30076

GECRB PO. BOX 960013 Orlando, FL 32896

HSBC Bank Bankrupty Department PO Box 5226 Carol Stream, IL 60197-5226

HSBC Bank Nevada N.A. c/o Portfolio Recovery Associates 120 Corporate Blvd., Ste. 100 Norfolk, VA 23502

HSBC Card Services PO Box 17051 Baltimore, MD 21297-1051

HSBC Retail Services PO Box 17298 Baltimore, MD 21297-1298

Kohl's Department Store c/o Credit Collection Services Two Wells Ave, Dept. 77e Newton Center, MA 02459

Kohl/Chase (Kohl's Department Store) Attn: Bankruptcy Department N54W 17000 Ridgewood Drive Menomonee Falls, WI 53051

Kohls/CAP1 PO Box 3115 Milwaukee, WI 53201-3115

Lake Law Magistrate Court 18 N. County St. Waukegan, IL 60085 Midland Credit Management, Inc. Bankruptcy Department 8875 Aero Drive, Ste 200 San Diego, CA 92123

Northwest Community Hospital c/o Harris & Harris LTD 111 W. Jackson Blvd., Ste. 400 Chicago, IL 60604

Northwest Community Hospital P.O. Box 5990 Carol Stream, IL 60197

Ocwen Loan Servicing, LLC 1661 Worthington Rd., Ste.100 West Palm Beach, FL 33409

Portfolio Recovery Associates 120 Corporate Blvd., Ste. 100 Norfolk, VA 23502

Portfolio Recovery Associates Bankruptcy Department 500 W. 1st Ave Hutchinson, KS 67501-5222

TD Auto Finance PO Box 9223 Farmington, MI 48333-9223

Trident Asset Management PO Box 888424 Atlanta, GA 30356

Wells Fargo 800 Walnut St. Des Moines, IA 50309

Wells Fargo Bank NA c/o CACH, LLC 4340 S. Monaco St., Unit 2 Denver, CO 80237 Wells Fargo Financial Bank c/o LVNV Funding, LLC PO Box 10497 Greenville, SC 29603

Wells Fargo Financial Cards PO Box 98791 Las Vegas, NV 89193-8791